Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
WESTERN DISTRICT OF MICHIGAN	_	
Case number (if known)	_ Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	Kevin First name G. Middle name Ford Last name and Suffix (Sr., Jr., II, III)	Patricia First name L. Middle name Ford Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-0197	xxx-xx-1123

Debtor 1 **Kevin G. Ford**Debtor 2 **Patricia L. Ford**

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	■ I have not used any business name or EINs.	■ I have not used any business name or EINs.			
	Include trade names and doing business as names	Business name(s)	Business name(s)			
		EINs	EINs			
5.	Where you live	622 West Ransom Street Kalamazoo, MI 49007	If Debtor 2 lives at a different address:			
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code			
		Kalamazoo				
		County	County			
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.			
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code			
6.	Why you are choosing this district to file for bankruptcy	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.			
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)			

	otor 1	Patricia L. Ford					Case number (if known)					
Par	t 2:	Tell the Court About	our Bankrupto	y Case								
7.	Banl	chapter of the	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.									
	cnoc	sing to file under	☐ Chapter 7									
			☐ Chapter 11									
			☐ Chapter 12									
			■ Chapter 13									
8.	How	you will pay the fee	about ho order. If a pre-pri	w you may pay. your attorney is s nted address.	Typically, if you are submitting your paym	paying the ent on you	fee yourself, you may pay with r behalf, your attorney may pa	n your local court for more details cash, cashier's check, or money y with a credit card or check with				
					installments. If you nents (Official Form 1		s option, sign and attach the A	pplication for Individuals to Pay				
			☐ I request but is no applies t	t that my fee be t required to, wa o your family size	e waived (You may roive your fee, and ma e and you are unable	equest this do so onleto pay the	y if your income is less than 15	Chapter 7. By law, a judge may, 50% of the official poverty line that bose this option, you must fill out t with your petition.				
							,					
9.	bank	you filed for ruptcy within the 3 years?	■ No.									
last	iast	years:	☐ Yes.	trict	1	Vhen	Cooo num	shor				
				trict		Vhen	Case num Case num					
				trict		Vhen	Case num					
10.		any bankruptcy s pending or being	■ No									
	filed not f you,	by a spouse who is iling this case with or by a business ner, or by an	☐ Yes.									
			Del	otor			Relationshi	p to you				
			Dis	trict	\	Vhen	Case numb	per, if known				
			Del	otor			Relationshi	p to you				
			Dis	trict	\	Vhen	Case numb	per, if known				
11.		ou rent your lence?	■ No. G	to line 12.								
			☐ Yes. Ha	as your landlord	obtained an eviction	judgment a	gainst you?					
				No. Go to I	ine 12.							
					ut <i>Initial Statement Al</i> uptcy petition.	oout an Evi	ction Judgment Against You (F	Form 101A) and file it as part of				

	otor 1 Kevin G. Ford otor 2 Patricia L. Ford			Case number (if known)
Par	rt 3: Report About Any Bu	usinesses	You Own as a Sole Proprie	tor
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to Part 4.	
		☐ Yes.	Name and location of bus	iness
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name of business, if any	
	If you have more than one sole proprietorship, use a separate sheet and attach it to this petition.		Number, Street, City, Stat	x to describe your business:
	it to this petition.		• • •	ness (as defined in 11 U.S.C. § 101(27A))
			_	Estate (as defined in 11 U.S.C. § 101(51B))
			_	efined in 11 U.S.C. § 101(53A))
			_ `	r (as defined in 11 U.S.C. § 101(6))
			☐ None of the above	• • • • • • • • • • • • • • • • • • • •
13. Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?		deadline operation	s. If you indicate that you are	court must know whether you are a small business debtor so that it can set appropriate a small business debtor, you must attach your most recent balance sheet, statement of ederal income tax return or if any of these documents do not exist, follow the procedure
	For a definition of small	■ No.	I am not filing under Chap	oter 11.
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing under Chapter Code.	11, but I am NOT a small business debtor according to the definition in the Bankruptcy
		☐ Yes.	I am filing under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.
Par	rt 4: Report if You Own or	r Have An	/ Hazardous Property or An	y Property That Needs Immediate Attention
14.	,	■ No.		
	property that poses or is alleged to pose a threat of imminent and identifiable hazard to	☐ Yes.	What is the hazard?	
	public health or safety? Or do you own any property that needs immediate attention?		If immediate attention is needed, why is it needed?	
For example, do you own perishable goods, or livestock that must be fed, Where is the property? or a building that needs urgent repairs?				
	- •			Number, Street, City, State & Zip Code

Debtor 1
Debtor 2
Patricia L. Ford
Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

 □ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Official Form 101

	tor 1 Kevin G. tor 2 Patricia					Case no	umber (if known)			
Par	6: Answer Th	ese Questi	ons for Re	eporting Purposes						
16.	What kind of de you have?	ebts do	16a.	Are your debts primarily con individual primarily for a person			e defined in 11 L	J.S.C. § 101(8) as "incurred by an		
				☐ No. Go to line 16b.						
				Yes. Go to line 17.						
			16b.	Are your debts primarily bus money for a business or invest						
				☐ No. Go to line 16c.						
				☐ Yes. Go to line 17.						
			16c.	State the type of debts you ow	e that are not consun	ner debts or bu	siness debts			
17.	Are you filing u	nder	■ No.	I am not filing under Chapter 7	'. Go to line 18.					
	Do you estimate that after any exempt property is excluded and		☐ Yes.	I am filing under Chapter 7. Do are paid that funds will be avail				luded and administrative expenses		
	administrative e	expenses		□ No						
	are paid that funds will be available for distribution to unsecured creditors?			□ Yes						
18.	How many Cred		1 -49		1 ,000-5,000		□ 25	5,001-50,000		
	you estimate the owe?	at you	□ 50-99		☐ 5001-10,000			0,001-100,000		
			☐ 100-19 ☐ 200-9		☐ 10,001-25,00	00	LI IVI	lore than100,000		
19.	How much do y	ou	□ \$0 - \$	50,000	□ \$1,000,001 -	- \$10 million	□ \$	500,000,001 - \$1 billion		
	estimate your a be worth?	ate your assets to		01 - \$100,000	\$10,000,001			1,000,000,001 - \$10 billion		
				001 - \$500,000 001 - \$1 million	□ \$50,000,001 □ \$100,000,00	•		10,000,000,001 - \$50 billion lore than \$50 billion		
20.	How much do y		□ \$0 - \$	50,000	□ \$1,000,001 -	- \$10 million	□ \$	500,000,001 - \$1 billion		
	estimate your litto be?	abilities		001 - \$100,000	□ \$10,000,001			61,000,000,001 - \$10 billion		
			_ ` `	001 - \$500,000 001 - \$1 million	□ \$50,000,001 □ \$100,000,00	•		310,000,000,001 - \$50 billion More than \$50 billion		
Par	:7: Sign Below	v								
For	you		I have ex	amined this petition, and I decla	are under penalty of p	erjury that the i	information prov	rided is true and correct.		
				chosen to file under Chapter 7, lates Code. I understand the rel						
				rney represents me and I did no t, I have obtained and read the				ey to help me fill out this		
			I request	relief in accordance with the ch	apter of title 11, Unite	ed States Code	, specified in thi	s petition.		
								by fraud in connection with a oth. 18 U.S.C. §§ 152, 1341, 1519,		
			/s/ Kevi	n G. Ford		/s/ Patricia I				
				e of Debtor 1		Signature of D				
			Executed	I on June 20, 2019		Executed on	June 20, 201	19		
				MM / DD / YYYY			MM / DD / YY			

Debtor 1 Debtor 2	Kevin G. Ford Patricia L. Ford	Case number (if known)							
represen	attorney, if you are ted by one	I, the attorney for the debtor(s) named in this petition, de under Chapter 7, 11, 12, or 13 of title 11, United States C for which the person is eligible. I also certify that I have a	ode, and have e delivered to the o	explained the relief available under each chapter debtor(s) the notice required by 11 U.S.C. § 342(b)					
	e not represented by ey, you do not need s page.	and, in a case in which § 707(b)(4)(D) applies, certify the schedules filed with the petition is incorrect.	it I have no know	ledge after an inquiry that the information in the					
	. •	/s/ Kerry Hettinger	Date	June 20, 2019					
		Signature of Attorney for Debtor	_	MM / DD / YYYY					
		Kerry Hettinger P53569 Printed name							
		Kerry Hettinger PLC Firm name							
		4341 South Westnedge Avenue Suite 1202 Kalamazoo, MI 49008							
		Number, Street, City, State & ZIP Code Contact phone 269-344-0700	Email address	khett57@hotmail.com					
		P53569 MI							
		Bar number & State							

		Ouse		ig L	500 m.i Tiled. 00/21/2015	i age o	0. 01		
Fill i	n this inform	nation to identify	your case and th	nis filinç	g:				
Debt	or 1	Kevin G. For	·d						
		First Name		Name	Last Name				
Debt	or 2 se, if filing)	Patricia L. Fo		e Name	Last Name				
(Spous	se, ii iiiing)	First Name	Middle	e ivame	Last Name				
Unite	ed States Bar	nkruptcy Court for	the: WESTERN	I DISTR	ICT OF MICHIGAN				
Case	number _								Check if this is an amended filing
Sc n eachink i	hedule h category, se t fits best. Be	e as complete and a space is needed, a	roperty escribe items. List	e. If two	only once. If an asset fits in more than on married people are filing together, both ar his form. On the top of any additional page	e equally respo	nsible for su	the ca	g correct
Part 1	Describe E	Each Residence, Bu	uilding, Land, or Ot	her Real	Estate You Own or Have an Interest In				
_	No. Go to Part Yes. Where is								
1.1				What	t is the property? Check all that apply				
	622 West F	Ransom Street			Single-family home	Do not dedu	ct secured cla	aims or	exemptions. Put
_	Street address, if	f available, or other des	cription		Duplex or multi-unit building Condominium or cooperative				ns on Schedule D: cured by Property.
_	Kalamazoo		49007-0000			Current valuentire prope	erty?		rent value of the tion you own?
	City	State	ZIP Code			\$100	0,000.00		\$100,000.00
				U Who	11110011010	(such as fee a life estate	simple, ten), if known.	ancy b	vnership interest by the entireties, or
					Debtor 1 only	Tenants I	by Entiret	У	
-	Kalamazoo	D			Debtor 2 only				
	County				Debtor 1 and Debtor 2 only	☐ Check i	if this is com	munit	y property
					, it leads one of the debtero and allower.	(see instr	ructions)		
					r information you wish to add about this ite erty identification number:	em, such as loc	al		

Debtor 1 Debtor 2					Case	e number (if known)	
1.2 210	ou own or hav 0-212 North Mc et address, if available,	Kinley	than one, list h	What □ ■	Single-family home Duplex or multi-unit building Condominium or cooperative	Do not deduct secured cla the amount of any secure Creditors Who Have Clair	d claims on <i>Schedule D:</i>
Bat City	ttle Creek	MI State	49017-0000 ZIP Code		Investment property Timeshare Other has an interest in the property? Check one	Current value of the entire property? \$95,000.00 Describe the nature of y (such as fee simple, ten a life estate), if known. Joint	Current value of the portion you own? \$95,000.00 our ownership interest ancy by the entireties, or
Cour	Ihoun hty				Debtor 1 and Debtor 2 only	☐ Check if this is com (see instructions) m, such as local	nmunity property
1.3 714	ou own or hav North Church at address, if available,	Street	than one, list h		is the property? Check all that apply Single-family home Duplex or multi-unit building Condominium or cooperative	Do not deduct secured cla the amount of any secure Creditors Who Have Clair	d claims on <i>Schedule D:</i>
Kal City	lamazoo	MI State	49007-0000 ZIP Code	 	Investment property Timeshare Other has an interest in the property? Check one	Current value of the entire property? \$55,000.00 Describe the nature of y (such as fee simple, ten a life estate), if known. Joint	Current value of the portion you own? \$55,000.00 our ownership interest ancy by the entireties, or
Cour	lamazoo nty			□ ■ Othe	Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another r information you wish to add about this iter erty identification number:	☐ Check if this is com	nmunity property

Debtor 1 Debtor 2					Case	e number (if known)		
1.4			than one, list h		is the property? Check all that apply			
	16 North Church Street treet address, if available, or other description		cription	■	Single-family home Duplex or multi-unit building Condominium or cooperative	Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D Creditors Who Have Claims Secured by Property.		
Ka City	lamazoo	MI State	49007-0000 ZIP Code		· ·····oonaro	Current value of the entire property? \$53,000.00 Describe the nature of y	Current value of the portion you own? \$53,000.00	
				Who	Other has an interest in the property? Check one Debtor 1 only		ancy by the entireties, or	
Cour	lamazoo nty			prope	Debtor 1 and Debtor 2 only At least one of the debtors and another r information you wish to add about this ite erty identification number:	Check if this is com (see instructions) m, such as local	nmunity property	
1.5 22 (ou own or ha		than one, list h		: is the property? Check all that apply Single-family home	Do not deduct secured cla		
	,	,			Duplex or multi-unit building Condominium or cooperative	Creditors Who Have Clair		
City	lamazoo	MI State	49007-0000 ZIP Code		Investment property Timeshare	Current value of the entire property? \$65,000.00 Describe the nature of y	Current value of the portion you own? \$65,000.00	
Ka	Valamana a			_	has an interest in the property? Check one Debtor 1 only	(such as fee simple, tenancy by the entireties, o a life estate), if known. Joint		
Cour	lamazoo nty				Debtor 1 and Debtor 2 only	Check if this is com (see instructions) m, such as local	nmunity property	

Debtor 1 Debtor 2					Case	number (if known)	
1.6 15 2	you own or ha 21 North Park et address, if availabl	Street	than one, list h		is the property? Check all that apply Single-family home Duplex or multi-unit building Condominium or cooperative	Do not deduct secured cl the amount of any secure Creditors Who Have Clair	ed claims on Schedule D:
Ka City	llamazoo	MI State	49007-0000 ZIP Code		Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check one Debtor 1 only		Current value of the portion you own? \$48,000.00 your ownership interest lancy by the entireties, or
Cou	Ilamazoo inty				Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another r information you wish to add about this itererty identification number:	Check if this is con (see instructions) n, such as local	nmunity property
1.7 61 8	you own or ha	Street	than one, list h		is the property? Check all that apply Single-family home Duplex or multi-unit building Condominium or cooperative	Do not deduct secured cl the amount of any secure Creditors Who Have Clai	ed claims on Schedule D:
Ka City	ılamazoo	MI State	49007-0000 ZIP Code	 	Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check one		Current value of the portion you own? \$53,000.00 your ownership interest lancy by the entireties, or
Ka Cou	ilamazoo _{inty}			□ □ Othe	Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Fee Simple ☐ Check if this is con (see instructions) m, such as local	nmunity property

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	Patricia L.	Ford			Case	e number (if known)	
If yo	ou own or ha	ve more	than one, list h		is the property? Check all that apply		
	North Churc	h Street			Single-family home	Do not deduct secured cla	aims or exemptions. Put
Stree	t address, if available	e, or other des	scription	_ 	Duplex or multi-unit building Condominium or cooperative	the amount of any secure Creditors Who Have Clair	d claims on Schedule D:
Kal	amazoo	МІ	49007-0000		Manufactured or mobile home	Current value of the entire property?	Current value of the portion you own?
City		State	ZIP Code		Investment property Timeshare Other has an interest in the property? Check one	\$50,000.00 Describe the nature of y (such as fee simple, ten a life estate), if known.	\$50,000.0
Kal	amazoo				Debtor 1 only Debtor 2 only	Joint	
Coun					Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another information you wish to add about this iter	Check if this is com	nmunity property
	ou own or ha	ve more	than one, list h		is the property? Check all that apply		
9	ou own or ha	ve more	than one, list h		is the property? Check all that apply Single-family home	Do not deduct secured cla	aims or exemptions. Put
9 619			· 	What		Do not deduct secured cla the amount of any secure Creditors Who Have Clair	d claims on Schedule D:
619 Stree	W North St		· 	What	Single-family home Duplex or multi-unit building	the amount of any secure Creditors Who Have Clair Current value of the entire property?	d claims on Schedule D: ms Secured by Property. Current value of the portion you own?
619 Stree	W North St taddress, if available	e, or other des	scription	What	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home	Current value of the entire property? \$3,500.00 Describe the nature of y	d claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$3,500.0
619 Stree	W North St taddress, if available	e, or other des	49007-0000	What	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare	the amount of any secure Creditors Who Have Clair Current value of the entire property? \$3,500.00	d claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$3,500.0
619 Stree Kali City	W North St taddress, if available	e, or other des	49007-0000	What	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check one	Current value of the entire property? \$3,500.00 Describe the nature of y (such as fee simple, ten a life estate), if known.	d claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$3,500.0
619 Stree Kali City	W North St t address, if available amazoo	e, or other des	49007-0000	What	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check one Debtor 1 only	Current value of the entire property? \$3,500.00 Describe the nature of y (such as fee simple, ten a life estate), if known. Joint Check if this is com (see instructions)	d claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$3,500.0 rour ownership interest ancy by the entireties, of
619 Stree Kali City	W North St t address, if available amazoo	e, or other des	49007-0000	What	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another information you wish to add about this item	Current value of the entire property? \$3,500.00 Describe the nature of y (such as fee simple, ten a life estate), if known. Joint Check if this is com (see instructions)	d claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$3,500.0 rour ownership interest ancy by the entireties, c

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Deb Deb		Kevin G. Ford Patricia L. Ford	Ca	se number (if known)	
3. C a	ars, vans	, trucks, tractors, sport utility	vehicles, motorcycles		
	No				
	Yes				
3.1	Make: Model:	Town & Country Chrysler	Who has an interest in the property? Check one Debtor 1 only	the amount of any	ured claims or exemptions. Put secured claims on Schedule D: ve Claims Secured by Property.
	Year:	2014 mate mileage:	■ Debtor 2 only □ Debtor 1 and Debtor 2 only	Current value of entire property?	, ,
		formation:	At least one of the debtors and another		
		ion: 622 West Ransom , Kalamazoo MI 49007	Check if this is community property (see instructions)	\$12,000	\$12,000.00
3.2	Make:	Ford Pickup	Who has an interest in the property? Check one	the amount of any	ured claims or exemptions. Put secured claims on Schedule D: ve Claims Secured by Property.
	Year:	2004	_ Debtor 1 only ☐ Debtor 2 only		
		mate mileage:	Debtor 1 and Debtor 2 only	Current value of tentire property?	the Current value of the portion you own?
		formation:	☐ At least one of the debtors and another		
		ion: 622 West Ransom , Kalamazoo MI 49007	Check if this is community property (see instructions)	\$5,000	.00 \$5,000.00
5 A	Yes dd the d	ollar value of the portion you on the propertion you will be a second to the portion you will be a second to the properties of the propert	own for all of your entries from Part 2, including an te that number here	y entries for	\$17,000.00
-					
		ibe Your Personal and Household			
		, , ,	interest in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
E	xamples: No	I goods and furnishings Major appliances, furniture, line	ens, china, kitchenware		
	Yes. D	escribe			
			oods & furniture- no item valued over \$600.00 West Ransom Street, Kalamazoo MI 49007		\$4,000.00
	No	Televisions and radios; audio, v including cell phones, cameras	video, stereo, and digital equipment; computers, printer , media players, games	rs, scanners; music c	ollections; electronic devices
	Yes. D	escribe			
			ones, Computer- no one item valued over \$60 2 West Ransom Street, Kalamazoo MI 49007	0.00	\$2,000.00

Debt Debt			nown)
E	other co	ue s and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, illections, memorabilia, collectibles	coin, or baseball card collections;
	No Yes. Describe		
E		rts and hobbies photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; cal instruments	noes and kayaks; carpentry tools;
	Yes. Describe		
	Firearms Examples: Pistols No Yes. Describe	, rifles, shotguns, ammunition, and related equipment	
	Clothes Examples: Everyo No Yes. Describe	lay clothes, furs, leather coats, designer wear, shoes, accessories	
		Location: 622 West Ransom Street, Kalamazoo MI 49007	\$500.00
	l No l Yes. Describe	Location: 622 West Ransom Street, Kalamazoo MI 49007	\$1,000.00
_	lon-farm animals Examples: Dogs,		
	Yes. Describe		
	Any other person	al and household items you did not already list, including any health aids you did not l	ist
	Yes. Give speci	fic information	
		Appliances in rental units	\$2,000.00
15.		alue of all of your entries from Part 3, including any entries for pages you have attache that number here	d \$9,500.00
Part -		Financial Assets	
Do y	ou own or have	any legal or equitable interest in any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
_		you have in your wallet, in your home, in a safe deposit box, and on hand when you file your	petition

Debtor 1 Debtor 2	Kevin G. Fo Patricia L. F			Case number (if known)	
Exan				ts; certificates of deposit; shares in credit unions, brokerage houses, th the same institution, list each.	and other similar
□ No ■ Yes	S			Institution name:	
		17.1.	Savings	Advia Credit Union	\$20.00
		17.2.	Checking	Honor Credit Union	\$0.00
		17.3.	Savings	Lake MI Credit Union#8131	\$0.00
		17.4.	Checking	Advia	\$0.00
		17.5.	Savings	Honor Credit Union	\$0.00
		17.6.	Checking	Chase	\$0.00
		17.7.	Savings	Lake Michigan Credit Union #9780	\$0.00
Exan ■ No	ls, mutual funds, nples: Bond funds			rage firms, money market accounts	
	publicly traded st venture	tock and	interests in incorporat	ted and unincorporated businesses, including an interest in an	LLC, partnership, and
☐ Yes	s. Give specific int		about them me of entity:	% of ownership:	
Nego Non- ■ No	otiable instruments negotiable instrun	s include p nents are	personal checks, cashie those you cannot transf	ble and non-negotiable instruments rs' checks, promissory notes, and money orders. er to someone by signing or delivering them.	
□ Yes	s. Give specific info		uer name:		
	ement or pension inples: Interests in			b), thrift savings accounts, or other pension or profit-sharing plans	
	s. List each accour		ely. of account:	Institution name:	
Your	rity deposits and share of all unuse mples: Agreements	ed deposit	ts you have made so tha	at you may continue service or use from a company lic utilities (electric, gas, water), telecommunications companies, or	others
	S			Institution name or individual:	
23. Annu ■ No	ities (A contract fo	or a perio	dic payment of money to	o you, either for life or for a number of years)	

	ebtor 1 ebtor 2	Kevin G. F Patricia L.		Case number (if known)	
	☐ Yes		Issuer name and description.		
24.	26 U.S.C		ation IRA, in an account in a qualified ABLE program, or under 1), $529A(b)$, and $529(b)(1)$.	r a qualified state tuition prograr	n.
	■ No □ Yes		Institution name and description. Separately file the records of any	y interests.11 U.S.C. § 521(c):	
25.	Trusts,	equitable or	future interests in property (other than anything listed in line	1), and rights or powers exercise	able for your benefit
		Give specific	information about them		
26.			, trademarks, trade secrets, and other intellectual property domain names, websites, proceeds from royalties and licensing agr	eements	
	☐ Yes.	Give specific	information about them		
27.	Example No	les: Building p	s, and other general intangibles permits, exclusive licenses, cooperative association holdings, liquo	r licenses, professional licenses	
			information about them		Occurred to allow of the
IVI	oney or p	roperty owe	a to you?		Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	. Tax refu ■ No	ınds owed to	o you		
	☐ Yes. 0	Give specific i	information about them, including whether you already filed the retu	urns and the tax years	
29.	Example No		or lump sum alimony, spousal support, child support, maintenance	e, divorce settlement, property settl	ement
	☐ Yes. 0	Give specific i	information		
30.		<i>les:</i> Unpaid w	neone owes you vages, disability insurance payments, disability benefits, sick pay, v unpaid loans you made to someone else	acation pay, workers' compensation	on, Social Security
		Give specific	information		
31.		s in insurand les: Health, di	ce policies isability, or life insurance; health savings account (HSA); credit, ho	meowner's, or renter's insurance	
		lame the insu	urance company of each policy and list its value. Company name: Bei	neficiary:	Surrender or refund value:
32.	If you a		perty that is due you from someone who has died ciary of a living trust, expect proceeds from a life insurance policy,	or are currently entitled to receive p	property because
	■ No □ Yes.	Give specific	information		
33.	Exampl		d parties, whether or not you have filed a lawsuit or made a deas, employment disputes, insurance claims, or rights to sue	mand for payment	
	■ No □ Yes. I	Describe eac	h claim		
34.	Other co	ontingent an	nd unliquidated claims of every nature, including counterclaim	s of the debtor and rights to set	off claims

Debtor 2			Case number (if known)	
□Ye	es. Describe each claim			
35. Any	financial assets you did not already list			
■ No				
□Y€	es. Give specific information			
	ld the dollar value of all of your entries from Part 4, includin Part 4. Write that number here			\$20.00
Part 5:	Describe Any Business-Related Property You Own or Have an Inter	est In. List any real est	ate in Part 1.	
37. Do yo	ou own or have any legal or equitable interest in any business-relate	ed property?		
No.	Go to Part 6.			
☐ Yes	s. Go to line 38.			
	Describe Any Farm- and Commercial Fishing-Related Property You If you own or have an interest in farmland, list it in Part 1.	Own or Have an Interes	st In.	
	you own or have any legal or equitable interest in any farm-	or commercial fishir	ng-related property?	
	No. Go to Part 7.			
	Yes. Go to line 47.			
Part 7:	Describe All Property You Own or Have an Interest in That You	ı Did Not List Above		
	you have other property of any kind you did not already list? amples: Season tickets, country club membership	?		
	es. Give specific information			
54. Ad	ld the dollar value of all of your entries from Part 7. Write th	at number here		\$0.00
Part 8:	List the Totals of Each Part of this Form			
55. Pa	rt 1: Total real estate, line 2			\$522,500.00
56. Pa	rt 2: Total vehicles, line 5	\$17,000.00	-	· ,
57. Pa	rt 3: Total personal and household items, line 15	\$9,500.00		
58. Pa	rt 4: Total financial assets, line 36	\$20.00		
59. Pa	rt 5: Total business-related property, line 45	\$0.00		
60. Pa	rt 6: Total farm- and fishing-related property, line 52	\$0.00		
61. Pa	rt 7: Total other property not listed, line 54 +	\$0.00		
62. To	tal personal property. Add lines 56 through 61	\$26,520.00	Copy personal property total	\$26,520.00
63. To	tal of all property on Schedule A/B. Add line 55 + line 62			\$549,020,00

Debtor 1	Kevin G. Ford				
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	WESTERN DISTRICT O	DF MICHIGAN		
Case number				☐ Check if this	e ie ar
()				amended fil	

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Pa	Irt 1: Identify the Property You Claim as E	xempt							
1.	Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.								
	☐ You are claiming state and federal nonban	kruptcy exemptions.	11 U.S	S.C. § 522(b)(3)					
	■ You are claiming federal exemptions. 11 U	J.S.C. § 522(b)(2)							
2.	For any property you list on <i>Schedule A/B</i> that you claim as exempt, fill in the information below.								
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption				
		Copy the value from Check only one box for each exemption. Schedule A/B							
De	ebtor 1 Exemptions 622 West Ransom Street Kalamazoo,	\$100,000.00		\$0.00	11 U.S.C. § 522(d)(1)				
	MI 49007 Kalamazoo County Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit					
	210-212 North McKinley Battle Creek	\$95,000.00		\$8,905.00	11 U.S.C. § 522(d)(5)				
	MI 49017 Calhoun County Line from Schedule A/B: 1.2			100% of fair market value, up to any applicable statutory limit					
	714 North Church Street Kalamazoo, MI 49007 Kalamazoo County	\$55,000.00		\$3,995.00	11 U.S.C. § 522(d)(5)				
	2 Unit Line from Schedule A/B: 1.3			100% of fair market value, up to any applicable statutory limit					
	2004 Ford Pickup Location: 622 West Ransom Street.	\$5,000.00		\$4,000.00	11 U.S.C. § 522(d)(2)				
	Kalamazoo MI 49007 Line from Schedule A/B: 3.2			100% of fair market value, up to any applicable statutory limit					
	2004 Ford Pickup Location: 622 West Ransom Street,	\$5,000.00		\$1,000.00	11 U.S.C. § 522(d)(5)				
	Kalamazoo MI 49007			100% of fair market value, up to					

rief description of the property and line on chedule A/B that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption
	0 " ' (portion you own		
	Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
	\$4,000.00		\$2,000.00	11 U.S.C. § 522(d)(3)
ocation: 622 West Ransom Street, alamazoo MI 49007			100% of fair market value, up to any applicable statutory limit	
	\$2,000.00		\$1,000.00	11 U.S.C. § 522(d)(3)
ocation: 622 West Ransom Street, alamazoo MI 49007			100% of fair market value, up to any applicable statutory limit	
•	\$500.00		\$250.00	11 U.S.C. § 522(d)(3)
			100% of fair market value, up to any applicable statutory limit	
•	\$1,000.00		\$500.00	11 U.S.C. § 522(d)(4)
			100% of fair market value, up to any applicable statutory limit	
	\$0.00		\$0.00	11 U.S.C. § 522(d)(5)
The Holli dollicodic 7V D. TTI			100% of fair market value, up to any applicable statutory limit	
Subject to adjustment on 4/01/22 and every 3 No	B years after that for ca	ises fi	led on or after the date of adjustme	,
	Subject to adjustment on 4/01/22 and every 3 No	tem valued over \$600.00 cocation: 622 West Ransom Street, Kalamazoo MI 49007 ine from Schedule A/B: 6.1 IV's Cell Phones, Computer- no one tem valued over \$600.00 cocation: 622 West Ransom Street, Kalamazoo MI 49007 ine from Schedule A/B: 7.1 cocation: 622 West Ransom Street, Kalamazoo MI 49007 ine from Schedule A/B: 11.1 cocation: 622 West Ransom Street, Kalamazoo MI 49007 ine from Schedule A/B: 11.1 cocation: 622 West Ransom Street, Kalamazoo MI 49007 ine from Schedule A/B: 11.1 checking: Honor Credit Union ine from Schedule A/B: 17.2 checking: Honor Credit Union ine from Schedule A/B: 17.2 checking: Honor Credit Union ine from Schedule A/B: 17.2 checking: Honor Credit Union ine from Schedule A/B: 17.2	tem valued over \$600.00 cocation: 622 West Ransom Street, Calamazoo MI 49007 ine from Schedule A/B: 6.1 IV's Cell Phones, Computer- no one tem valued over \$600.00 cocation: 622 West Ransom Street, Calamazoo MI 49007 ine from Schedule A/B: 7.1 cocation: 622 West Ransom Street, Calamazoo MI 49007 ine from Schedule A/B: 11.1 cocation: 622 West Ransom Street, Calamazoo MI 49007 ine from Schedule A/B: 11.1 cocation: 622 West Ransom Street, Calamazoo MI 49007 ine from Schedule A/B: 12.1 checking: Honor Credit Union ine from Schedule A/B: 17.2 checking: Honor Credit Union ine from Schedule A/B: 17.2 checking: Honor Credit Union ine from Schedule A/B: 17.2 checking: Honor Credit Union ine from Schedule A/B: 17.2	The valued over \$600.00 Cocation: 622 West Ransom Street, ine from Schedule A/B: 6.1 TV's Cell Phones, Computer- no one tem valued over \$600.00 Cocation: 622 West Ransom Street, ine from Schedule A/B: 7.1 Cocation: 622 West Ransom Street, ine from Schedule A/B: 11.1 Cocation: 622 West Ransom Street, ine from Schedule A/B: 11.1 Cocation: 622 West Ransom Street, ine from Schedule A/B: 11.1 Cocation: 622 West Ransom Street, ine from Schedule A/B: 11.1 Cocation: 622 West Ransom Street, ine from Schedule A/B: 11.1 Cocation: 622 West Ransom Street, ine from Schedule A/B: 11.1 Cocation: 622 West Ransom Street, ine from Schedule A/B: 12.1 Cocation:

HE	II in this informa	ation to identify your ca	ase:			
_		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
D	ebtor 1	First Name	Middle Name	La	ast Name	
	ebtor 2	Patricia L. Ford				
(Sp	oouse if, filing)	First Name	Middle Name	La	ast Name	
Ur	nited States Bank	cruptcy Court for the:	WESTERN DISTRICT O	F MICHIG	GAN	
Ca	ase number					
(if I	known)					☐ Check if this is an amended filing
$\overline{}$	fficial For	m 106C				3
	fficial For			.1 . •		
<u>></u>	cnedule	C: The Pro	perty You C	laim	as Exempt	4/19
the nee	property you list eded, fill out and se number (if kno	ed on Schedule A/B: Pro attach to this page as ma wn).	operty (Official Form 106 <i>i</i> any copies of <i>Part 2: Add</i>	A/B) as yo ditional Pa	ur source, list the property that you ge as necessary. On the top of any	additional pages, write your name and
spe any fun exe	ecific dollar amo y applicable sta ids—may be un emption to a pa	ount as exempt. Alterna tutory limit. Some exen limited in dollar amoun	atively, you may claim t nptions—such as those nt. However, if you clain	he full fai for healt an exem	r market value of the property be h aids, rights to receive certain b option of 100% of fair market valu	One way of doing so is to state a ing exempted up to the amount of enefits, and tax-exempt retirement e under a law that limits the t, your exemption would be limited
Pa	art 1: Identify	the Property You Clain	n as Exempt			
1.	Which set of e	exemptions are you clai	iming? Check one only.	even if yo	ur spouse is filing with you.	
	_		onbankruptcy exemptions	•	, ,	
	_	ming federal exemptions	. , .			
_			• (,(,			
2.		•		• •	fill in the information below.	
		n of the property and line on at lists this property	on Current value of the portion you own	ne Amo	ount of the exemption you claim	Specific laws that allow exemption
			Copy the value from Schedule A/B	n <i>Che</i>	ck only one box for each exemption.	
De	ebtor 2 Exemp	otions	00.1044.0742			
	622 West Ra	nsom Street Kalama	^{IZOO,} \$100,000.0	00 🔳	\$0.00	11 U.S.C. § 522(d)(1)
	Line from Sche	llamazoo County			100% of fair market value, up to	
					any applicable statutory limit	
	210-212 Nort	th McKinley Battle C	reek, \$95,000.0	0 =	\$8,905.00	11 U.S.C. § 522(d)(5)
		Ihoun County	Ψ33,000.0			
	Line from Sche	eaule A/B: 1.2			100% of fair market value, up to any applicable statutory limit	
	714 North Cl	nurch Street Kalama	zoo, \$55,000.0	0 =	\$4,975.00	11 U.S.C. § 522(d)(5)
	MI 49007 Ka 2 Unit	lamazoo County		<u> </u>	<u> </u>	
	Line from Sche	edule A/B: 1.3			100% of fair market value, up to any applicable statutory limit	
		& Country Chrysler	\$12,000.0	0 =	\$0.00	11 U.S.C. § 522(d)(2)
	Location: 62 Kalamazoo	2 West Ransom Stre	eet,		·	
	Line from Sche				100% of fair market value, up to any applicable statutory limit	

	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B		ount of the exemption you claim eck only one box for each exemption.	Specific laws that allow exemption
	Household goods & furniture- no item valued over \$600.00 Location: 622 West Ransom Street, Kalamazoo MI 49007 Line from Schedule A/B: 6.1	\$4,000.00		\$2,000.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)
	TV's Cell Phones, Computer- no one item valued over \$600.00	\$2,000.00		\$1,000.00	11 U.S.C. § 522(d)(3)
	Location: 622 West Ransom Street, Kalamazoo MI 49007 Line from Schedule A/B: 7.1			100% of fair market value, up to any applicable statutory limit	
	Location: 622 West Ransom Street, Kalamazoo MI 49007	\$500.00		\$250.00	11 U.S.C. § 522(d)(3)
	Line from Schedule A/B: 11.1			100% of fair market value, up to any applicable statutory limit	
	Location: 622 West Ransom Street, Kalamazoo MI 49007	\$1,000.00		\$500.00	11 U.S.C. § 522(d)(4)
	Line from Schedule A/B: 12.1			100% of fair market value, up to any applicable statutory limit	
	Savings: Advia Credit Union Line from Schedule A/B: 17.1	\$20.00		\$20.00	11 U.S.C. § 522(d)(5)
	Line II of II ochedule Alb. 1111			100% of fair market value, up to any applicable statutory limit	
3.	Are you claiming a homestead exemption of (Subject to adjustment on 4/01/22 and every 3 No Yes. Did you acquire the property covered No Yes	3 years after that for ca	ises fi	,	,

	0430.13	02700 jtg	u. 00/2	1/2015 Tag	3 22 01 01	
Fill in this informa	ation to identify you	r case:				
Debtor 1	Kevin G. Ford					
	First Name	Middle Name Las	t Name		•	
Debtor 2 (Spouse if, filing)	Patricia L. Ford	Middle Name Las	st Name		-	
United States Bank	kruptcy Court for the:	WESTERN DISTRICT OF MICHIGA	AN			
Case number						
(if known)					_	if this is an
<u> </u>					ameno	ded filing
Official Form	106D					
	-	Who Have Claims Se	curad	by Propert	V	12/15
Scriedule L	J. Creditors	Wild Have Claims Se	cui eu	by Propert	у	12/13
		f two married people are filing together, be				
number (if known).	Additional Page, fill it c	out, number the entries, and attach it to thi	s torm. On	the top of any addition	nai pages, write your na	me and case
1. Do any creditors h	ave claims secured by	your property?				
□ No. Check t	his box and submit th	nis form to the court with your other sche	edules. You	u have nothing else t	o report on this form.	
Yes Fill in a	all of the information b	nelow		_		
		olow.				
<u> </u>	Secured Claims			Column A	Column B	Column C
		nore than one secured claim, list the creditor a particular claim, list the other creditors in P		Amount of claim	Value of collateral	Unsecured
		cal order according to the creditor's name.		Do not deduct the value of collateral.	that supports this claim	portion
Lake Michig	gan Credit			value of collateral.	Ciaim	If any
Union		Describe the property that secures the cl	laim:	\$77,190.00	\$95,000.00	\$0.00
Creditor's Name		210-212 North McKinley Battle Creek, MI 49017 Calhoun Count	ty			
PO Box 284	48	As of the date you file, the claim is: Check	all that			
Grand Rapi	ids, MI 49501	apply. Contingent				
Number, Street, C	City, State & Zip Code	☐ Unliquidated				
		☐ Disputed				
Who owes the deb	t? Check one.	Nature of lien. Check all that apply.				
Debtor 1 only		■ An agreement you made (such as mortg	age or secu	red		
Debtor 2 only		car loan)				
■ Debtor 1 and Deb	tor 2 only	☐ Statutory lien (such as tax lien, mechanic	c's lien)			
At least one of the	debtors and another	☐ Judgment lien from a lawsuit				
☐ Check if this clai community debt		Other (including a right to offset)				

Date debt was incurred 10/2006

Last 4 digits of account number

Debio	r 1 Kevin G. Ford		Case number (if known)		
	First Name Middle N	ame Last Name			
Debto	T GETTOTG	Lost Nome			
	First Name Middle N	ame Last Name			
	_ake Michigan Credit		\$29 049 7 5	\$55,000,00	\$0.00
	Union Creditor's Name	Describe the property that secures the claim:	\$38,948.75	\$55,000.00	\$0.00
C	reditor's Name	714 North Church Street Kalamazoo, MI 49007 Kalamazoo County 2 Unit			
F	PO Box 2848	As of the date you file, the claim is: Check all that apply.			
(Grand Rapids, MI 49501	☐ Contingent			
N	Number, Street, City, State & Zip Code	☐ Unliquidated			
Who o	owes the debt? Check one.	Disputed Nature of lien. Check all that apply.			
	otor 1 only otor 2 only	An agreement you made (such as mortgage or sec car loan)	cured		
■ Deb	otor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ At le	east one of the debtors and another	☐ Judgment lien from a lawsuit			
	eck if this claim relates to a mmunity debt	Other (including a right to offset)			
Date de	ebt was incurred 9/2006	Last 4 digits of account number			
<u> </u>	aka Miahiwan Cuadit				
	Lake Michigan Credit Jnion	Describe the property that secures the claim:	\$45,054.22	\$65,000.00	\$0.00
ر ^{2.3} ر		220 North Street Kalamazoo, MI 49007 Kalamazoo County	\$45,054.22	\$65,000.00	\$0.00
^{2.3} L	Union	220 North Street Kalamazoo, MI 49007 Kalamazoo County 4 Unit As of the date you file, the claim is: Check all that apply.	\$45,054.22	\$65,000.00	\$0.00
2.3 L	Union Creditor's Name PO Box 2848	220 North Street Kalamazoo, MI 49007 Kalamazoo County 4 Unit As of the date you file, the claim is: Check all that apply. □ Contingent	\$45,054.22	\$65,000.00	\$0.00
2.3 L	Union Creditor's Name PO Box 2848 Grand Rapids, MI 49501	220 North Street Kalamazoo, MI 49007 Kalamazoo County 4 Unit As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed	<u>\$45,054.22</u>	\$65,000.00	\$0.00
F (Union Creditor's Name PO Box 2848 Grand Rapids, MI 49501	220 North Street Kalamazoo, MI 49007 Kalamazoo County 4 Unit As of the date you file, the claim is: Check all that apply. Contingent Unliquidated	<u>\$45,054.22</u> _	\$65,000.00	\$0.00
F G Who o	Union Creditor's Name PO Box 2848 Grand Rapids, MI 49501 Number, Street, City, State & Zip Code owes the debt? Check one. otor 1 only	220 North Street Kalamazoo, MI 49007 Kalamazoo County 4 Unit As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or see		\$65,000.00	\$0.00
F Who o	Union Creditor's Name PO Box 2848 Grand Rapids, MI 49501 Number, Street, City, State & Zip Code owes the debt? Check one. otor 1 only otor 2 only	220 North Street Kalamazoo, MI 49007 Kalamazoo County 4 Unit As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply.		\$65,000.00	\$0.00
Who o	Union Creditor's Name PO Box 2848 Grand Rapids, MI 49501 Number, Street, City, State & Zip Code owes the debt? Check one. otor 1 only otor 2 only otor 1 and Debtor 2 only	220 North Street Kalamazoo, MI 49007 Kalamazoo County 4 Unit As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or sec car loan) Statutory lien (such as tax lien, mechanic's lien)		\$65,000.00	\$0.00
Who o	Union Creditor's Name PO Box 2848 Grand Rapids, MI 49501 Number, Street, City, State & Zip Code owes the debt? Check one. otor 1 only otor 2 only	220 North Street Kalamazoo, MI 49007 Kalamazoo County 4 Unit As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or sec car loan)		\$65,000.00	\$0.00

Debtor 1	Kevin G. Ford		Case number (if known)		
	First Name Middle N	Name Last Name			
Debtor 2	Patricia L. Ford First Name Middle N	Jack Norma			
	FIRST Name Middle N	Name Last Name			
2.4 Lal	ke Michigan Credit ion	Describe the property that secures the claim:	\$37,976.55	\$48,000.00	\$0.00
Cred	itor's Name	1521 North Park Street Kalamazoo, MI 49007 Kalamazoo County			
_	Box 2848 and Rapids, MI 49501	As of the date you file, the claim is: Check all that apply. Contingent			
	ber, Street, City, State & Zip Code	☐ Unliquidated			
	s the debt? Check one.	☐ Disputed Nature of lien. Check all that apply.			
☐ Debtor☐ Debtor☐	•	An agreement you made (such as mortgage or se car loan)	ecured		
Debtor	1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ At leas	t one of the debtors and another	☐ Judgment lien from a lawsuit			
	if this claim relates to a nunity debt	Other (including a right to offset)			
Date debt	was incurred 9/2004	Last 4 digits of account number 0087			
^{∠.5} Un		Describe the property that secures the claim:	\$45,120.68	\$53,000.00	\$0.00
Cred	itor's Name	618 West North Street Kalamazoo, MI 49007 Kalamazoo County			
PO Box 2848 Grand Rapids, MI 49501		As of the date you file, the claim is: Check all that apply. Contingent			
Num	ber, Street, City, State & Zip Code	Unliquidated			
Who owe	s the debt? Check one.	☐ Disputed Nature of lien. Check all that apply.			
☐ Debtor☐ Debtor☐	•	An agreement you made (such as mortgage or se car loan)	ecured		
Debtor	1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ At leas	t one of the debtors and another	☐ Judgment lien from a lawsuit			
	if this claim relates to a	Other (including a right to offset)			
	nunity debt				

Debtor 1 Kevin G. Ford		Case number (if known)		
First Name Middle N	ame Last Name			
Debtor 2 Patricia L. Ford First Name Middle N	lame Last Name			
2.6 Lake Michigan Credit	Describe the property that secures the claim:	\$42,801.63	\$50,000.00	\$0.00
Creditor's Name	710 North Church Street Kalamazoo,			
	MI 49007 Kalamazoo County			
DO D 0040	As of the date you file, the claim is: Check all that			
PO Box 2848 Grand Rapids, MI 49501	apply.			
Number, Street, City, State & Zip Code	☐ Contingent ☐ Unliquidated			
, , , , , , , , , , , , , , , , , , ,	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	An agreement you made (such as mortgage or	secured		
Debtor 2 only	car loan)			
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one of the debtors and another☐ Check if this claim relates to a	☐ Judgment lien from a lawsuit☐ Other (including a right to offset)			
community debt	Other (including a right to diset)			
Date debt was incurred 10/2005	Last 4 digits of account number 011	۵.		
Date debt was incurred 10/2003	Last 4 digits of account number V11.	<u></u>		
2.7 Member First Mortgage	Describe the property that secures the claim:	\$102,636.00	\$100,000.00	\$2,636.00
Creditor's Name	622 West Ransom Street			
	Kalamazoo, MI 49007 Kalamazoo			
040 444 04 4 05	As of the date you file, the claim is: Check all that			
616 44th Street SE Grand Rapids, MI 49548	apply.			
Number, Street, City, State & Zip Code	☐ Contingent☐ Unliquidated			
Number, ettest, etty, etate a zip eede	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	■ An agreement you made (such as mortgage or	secured		
Debtor 2 only	car loan)			
■ Debtor 1 and Debtor 2 only □ At least one of the debtors and another	☐ Statutory lien (such as tax lien, mechanic's lien) ☐ Judgment lien from a lawsuit			
Check if this claim relates to a	☐ Other (including a right to offset)			
community debt				
Date debt was incurred 8/2006	Last 4 digits of account number 001	7		
2.8 Mr. Cooper	Describe the property that secures the claim:	\$45,233.03	\$53,000.00	\$0.00
Creditor's Name	716 North Church Street Kalamazoo,		,	
	MI 49007 Kalamazoo County			
8950 Cypress Waters	2 Unit As of the date you file, the claim is: Check all that			
Blvd	apply.			
Coppell, TX 75019	Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	■ An agreement you made (such as mortgage or	secured		
Debtor 2 only	car loan)			
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset)			
Date debt was incurred 4/2013	Last 4 digits of account number 884	9		

Debtor 1	1 Kevin G. Ford			Case number (if known)					
	First Name	Middle N	ame	Last Name					
Debtor 2	Patricia L. Fo	rd							
	First Name	Middle N	ame	Last Name					
2.9 Sa ı	ntander Consu	mer	Describe the pro	pperty that secures the c	laim:	\$22,483	3.42	\$12,000.00	\$10,483.42
Cred	itor's Name		2014 Town &	Country Chrysler					
			Location: 62	2 West Ransom Str	eet,				
			Kalamazoo M						
РО	Box 560284		As of the date yo apply.	ou file, the claim is: Chec	k all that				
Dal	llas, TX 75356		Contingent						
Num	ber, Street, City, State	& Zip Code	☐ Unliquidated						
			☐ Disputed						
Who owe	s the debt? Check	k one.	Nature of lien.	Check all that apply.					
☐ Debtor	1 only		An agreement	t you made (such as morto	nage or s	secured			
■ Debtor	2 only		car loan)	, ,	jg				
☐ Debtor	1 and Debtor 2 only	у	☐ Statutory lien	(such as tax lien, mechani	ic's lien)				
☐ At leas	t one of the debtors	and another	☐ Judgment lien	from a lawsuit	·				
	if this claim relate nunity debt	s to a	Other (including	ng a right to offset)					
Date debt	was incurred 20)15	Last 4 dig	gits of account number	2948	3			
A al al 4 la a	deller velve ef ve	ur amtriaa in C	alumn A an thia n	ana Writa that number h		¢	157 444 20	1	
	-		•	age. Write that number h otals from all pages.	iere:		157,444.28		
	at number here:	our rorm, auu	the donar value to	nais iroili aii pages.		\$4	157,444.28		

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

		, 0	
Fill in this info	rmation to identify your o	ase:	
Debtor 1	Kevin G. Ford		
200101	First Name	Middle Name Last Name	
Debtor 2	Patricia L. Ford		
(Spouse if, filing)	First Name	Middle Name Last Name	
United States E	Bankruptcy Court for the:	WESTERN DISTRICT OF MICHIGAN	
Case number			
(if known)			☐ Check if this is an
			amended filing
Official Fo	m 106F/F		
		ho Have Unsecured Claims	12/15
		e Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONI	
Schedule G: Exe Schedule D: Cred left. Attach the C	cutory Contracts and Unexpi ditors Who Have Claims Secu	that could result in a claim. Also list executory contracts on Schedule A/B: P red Leases (Official Form 106G). Do not include any creditors with partially sured by Property. If more space is needed, copy the Part you need, fill it out, not five the property of the property. If more space is needed, copy the Part you need, fill it out, not five the property of the	ecured claims that are listed in number the entries in the boxes on the
Part 1: List	All of Your PRIORITY Un	secured Claims	
1. Do any cred	itors have priority unsecured	I claims against you?	
No. Go to	Part 2.		
☐ Yes.			
	All () MONDRIGHT	/// LOU	
	All of Your NONPRIORIT		
3. Do any cred	itors have nonpriority unsec	ured claims against you?	
☐ No. You I	nave nothing to report in this pa	art. Submit this form to the court with your other schedules.	
Yes.			
4 List all of vo	our nonnriority unsecured cla	ims in the alphabetical order of the creditor who holds each claim. If a creditor	r has more than one nonpriority
unsecured cl	aim, list the creditor separately	for each claim. For each claim listed, identify what type of claim it is. Do not list clast the other creditors in Part 3.lf you have more than three nonpriority unsecured class	ims already included in Part 1. If more
			Total claim
4.1 Advia	Credit Union	Last 4 digits of account number	\$617.00
	rity Creditor's Name		
	. Riverview Drive	When was the debt incurred?	
	nazoo, MI 49004 Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	curred the debt? Check one.	7.6 of the date you me, the drain is. Check an that apply	
	tor 1 only	☐ Contingent	
☐ Deb	tor 2 only	☐ Unliquidated	
_	tor 1 and Debtor 2 only	☐ Disputed	
_	ast one of the debtors and and	T (NONDRIGHTY	
_	ast one of the debtors and and		
debt	on ii iiiis ciaiiii is itii a COIIIII	Obligations arising out of a separation agreement or divorce that	at you did not
Is the c	laim subject to offset?	report as priority claims	-
■ No		lacksquare Debts to pension or profit-sharing plans, and other similar debts	3
☐ Yes		Other. Specify Overdraft	

Nonprotry Creditors Name PO Box 773185 As of the date you file, the claim is: Check all that apply When was the debt incurred? As of the date you file, the claim is: Check all that apply Check if this claim is for a community debt	Debtor :	Kevin G. Ford Patricia L. Ford		Case number (if known)	
PO Box 790441 Saint Louis, MO 53179 Number Street City State 2ip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Check if this claim is for a community debt Is the claim subject to offset? Norpromity Creditor's Name PO Box 773185 3185 Solutions Center Chicago, IL 60677 Number Street City State 2ip Code Who incurred the debtor and another Chicago II and Debtor 2 only Debtor 1 only Contingent Undiquidated 4.4 Borgess Medical Center Chicago, IL 60677 Number Street City State 2ip Code Who incurred the debtor and another Chicago, IL 60677 Number Street City State 2ip Code Who incurred the debt? Check one. Debtor 1 only Debtor 1 only Check if this claim is for a community debt Is the claim subject to offset? Solutions Center Chicago, IL 60677 Number Street City State 2ip Code Who incurred the debtor and another Chicago, IL 60677 Number Street City State 2ip Code Who incurred the debtor and another Chicago, IL 60677 Number Street City State 2ip Code Who incurred the debtor and another Chicago, IL 60677 Number Street City State 2ip Code No incurred the debtor and another Chicago, IL 60677 Number Street City State 2ip Code No incurred the debtor of Name PO Box 773185 3185 Solutions Center Chicago, IL 60677 Number Street City State 2ip Code Who incurred the debtor State Chicago, IL 60677 Number Street City State 2ip Code Who incurred the debtor State Chicago, IL 60677 Number Street City State 2ip Code Who incurred the debtor State Chicago, IL 60677 Number Street City State 2ip Code Who incurred the debtor State Chicago, IL 60677 Number Street City State 2ip Code Who incurred the debtor State Chicago, IL 60677 Number Street City State 2ip Code Who incurred the debtor Chicago, IL 60677 Number Street City State 2ip Code Who incurred the debtor State 2ip Code Who incurred the debtor Chicago, IL 60677 Number Street City State 2ip Code Who incurred the debtor Chicago, IL 60677 Number Street City State 2ip Code Who incurred the debtor and another Chicago, IL 60677 Number Street City State 2ip Code No incu			Last 4 digits of account number	3201	\$406.26
Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? Norprofity Creditor's Name PO Box 773185 3185 Solutions Center Chicago, IL 60677 Number Street City State Zip Code Who incurred the debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 only Check if this claim is for a community debt Is the claim subject to offset? In the claim subject to offset? Debtor 1 only Debtor 1 onl		PO Box 790441	When was the debt incurred?	4/2011	
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Obligations arising out of a separation agreement or divorce that you did not report as priority claims		☐ At least one of the debtors and another	**	d claim:	
State claim subject to offset? Credit card purchases				ration agreement or divorce that you did not	
Borgess Medical Center Nonpriority Creditor's Name PO Box 773185 3185 Solutions Center Chicago, IL 60677 Number Sireet City State Zip Code Who incurred the debtr? Cendor's Name PO Box 773185 1 Residency Incurred the debtr? Cendor's Name PO Box 773185 1 Residency Incurred the debtr? Cendor's Name PO Box 773185 1 Residency Incurred the debtr? Cendor's Name PO Box 773185 1 Residency Incurred the debtr? Cendor's Name PO Box 773185 1 Residency Incurred the debtr? Cendor's Name PO Box 773185 1 Residency Incurred The debtr of an Opetion 2 only Incurred the debtr? Cendor's Name PO Box 773185 1 Residency Incurred The Debtor 2 only Incurred the debtr? Cendor's Name PO Box 773185 Normber Street City State Zip Code Who incurred the debtr? Cendor's Name PO Box 773185 Normber Street City State Zip Code Who incurred the debtr? Cendor Name Po Box 773185 Incurred the debtr? Cendor's Name In		Is the claim subject to offset?	report as priority claims		
Borgess Medical Center Nonpriority Creditor's Name PO Box 773185 3185 Solutions Center Chicago, IL 60677 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 and Debtor 2 only As of the date you file, the claim is: Check all that apply Debtor 1 and Debtor 1 only As of the date you file, the claim is: Check all that apply Debtor 1 and Debtor 2 only Debtor 1 only As of the date you file, the claim is one of the debtor sand another Chicago, IL 60677 Check if this claim is for a community debt Is the claim subject to offset? Debts to pension or profit-sharing plans, and other similar debts Debts 1 sand Debtor 2 only Debts to pension or profit-sharing plans, and other similar debts Debts 1 sand Debtor 2 only Debts 1 only Contingent Debts 1 only only Debts 1 only Debts 1 only Debts 1 only only only Debts 1 only only Debts 1 only Debts 1 only only Debts 1 only Debts 1 only only Debts 1 only only only only Debts 1 only only only only only only only only		No	Debts to pension or profit-sharing	g plans, and other similar debts	
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Is the claim subject to offset? No					
Debts to pension or profit-sharing plans, and other similar debts				ration agreement or divorce that you did not	
4.4 Borgess Medical Center Nonpriority Creditor's Name PO Box 773185 3185 Solutions Center Chicago, IL 60677 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Debts to pension or profit-sharing plans, and other similar debts As 4 digits of account number 0229 When was the debt incurred? 10/2015 As of the date you file, the claim is: Check all that apply Check all that apply Check all that apply Debts of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts		_		g plans, and other similar debts	
Nonpriority Creditor's Name PO Box 773185 3185 Solutions Center Chicago, IL 60677 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No When was the debt incurred? 10/2015 10/2015 10/2015 10/2015 10/2015 10/2015 10/2015 10/2015 10/2015				<u></u>	
Nonpriority Creditor's Name PO Box 773185 3185 Solutions Center Chicago, IL 60677 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No When was the debt incurred? 10/2015 10/2015 10/2015 10/2015 10/2015 10/2015 10/2015 10/2015 10/2015		Paragon Madical Contar	Look A distinct of account number	0220	¢E 672 04
When was the debt incurred? 10/2015 1			Last 4 digits of account number	0229	\$5,673.U 4
Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply Contingent Unliquidated Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts		PO Box 773185	When was the debt incurred?	10/2015	
Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Debtor 1 only Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts					
□ Debtor 1 only □ Contingent □ Debtor 2 only □ Unliquidated □ Debtor 1 and Debtor 2 only □ Disputed □ At least one of the debtors and another □ Check if this claim is for a community debt □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ No □ Debts to pension or profit-sharing plans, and other similar debts		·	As of the date you file, the claim	s: Check all that apply	
□ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ No □ Debts to pension or profit-sharing plans, and other similar debts □ Unliquidated □ Disputed Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts			☐ Contingent		
□ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt ls the claim subject to offset? □ No □ Debtor 1 and Debtor 2 only □ Disputed Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts		_	-		
□ At least one of the debtors and another □ Check if this claim is for a community debt □ Is the claim subject to offset? □ No □ Debts to pension or profit-sharing plans, and other similar debts □ Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts		_	_ `		
☐ Check if this claim is for a community debt Is the claim subject to offset? No Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts		_	•	d claim:	
debt Is the claim subject to offset? ■ No Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts		_	<u></u>		
■ No □ Debts to pension or profit-sharing plans, and other similar debts		debt	0 0 1	ration agreement or divorce that you did not	
		_		g plans, and other similar debts	
⊔ Yes ■ Other Specify Medical		□ Yes	Other Specify Medical		

Debtoi Debtoi	1 Kevin G. Ford 2 Patricia L. Ford		Case number (if known)			
4.5	Borgess Medical Group	Last 4 digits of account number	0634	\$205.00		
	Nonpriority Creditor's Name Attn#19006R PO Box 14000 Belfast, ME 04915	When was the debt incurred?	8/2017			
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply			
	☐ Debtor 1 only ☐ Debtor 2 only	☐ Contingent☐ Unliquidated				
	Debtor 1 and Debtor 2 only At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured	d claim:			
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not			
	■ No □ Yes	☐ Debts to pension or profit-sharin ☐ Other. Specify Medical	g plans, and other similar debts			
		— Other. Specify				
4.6	Capital One/Menards Nonpriority Creditor's Name	Last 4 digits of account number When was the debt incurred?	2651	\$6,149.35		
	PO Box 30253 Salt Lake City, UT 84130 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply			
	☐ Debtor 1 only ☐ Debtor 2 only	☐ Contingent ☐ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecure	1 claim:			
	☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset? ☐	Student loans	ration agreement or divorce that you did not			
	■ No □ Yes	Other. Specify Credit card				
4.7	Chase Bank	Last 4 digits of account number		\$0.00		
	Nonpriority Creditor's Name P.O. Box 15298 Wilmington, DE 19850	When was the debt incurred?				
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply			
	Debtor 1 only					
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecure	d claim.			
	At least one of the debtors and another	Student loans	a Oldiili.			
	☐ Check if this claim is for a community debt Is the claim subject to offset?	_	ration agreement or divorce that you did not			
	■ No	☐ Debts to pension or profit-sharing	g plans, and other similar debts			
	☐ Yes	Other. Specify Notice				

Debto Debto	or 1 Kevin G. Ford Patricia L. Ford	Case number (if known)	
4.8	Discover	Last 4 digits of account number	\$2,373.00
	Nonpriority Creditor's Name P.O. Box 3025 New Albany, OH 43054-3025	When was the debt incurred? 2007	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Credit Card	
4.9	Elan Financial Services Nonpriority Creditor's Name	Last 4 digits of account number	\$7,598.00
	P.O. Box 790408 Saint Louis, MO 63179	When was the debt incurred? 2014	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Credit Card	
4.1	Honor Credit Union	Last 4 digits of account number 3251	\$11,464.53
	Nonpriority Creditor's Name 8385 Edgewood Road	When was the debt incurred? 10/2012	
	Berrien Springs, MI 49103 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only		
	■ Debtor 1 and Debtor 2 only	☐ Unliquidated ☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	□ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other Specify Credit card purchases	
		— Galoi, opooliy	

Debtoi Debtoi	r 1 Kevin G. Ford r 2 Patricia L. Ford		Case number (if known)	
4.1 1	Honor Credit Union	Last 4 digits of account number	4972	\$999.92
	Nonpriority Creditor's Name 8385 Edgewood Road Berrien Springs, MI 49103	When was the debt incurred?		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	•	
	Yes	Other. Specify Installment	account	
4.1	Kalamazoo Anesthesiology	Last 4 digits of account number	0131	\$26.75
	Nonpriority Creditor's Name PO Box 4095	When was the debt incurred?	10/2018	
	900 Peeler Street			
	Kalamazoo, MI 49008 Number Street City State Zip Code	As of the date you file, the claim	is: Chack all that apply	
	Who incurred the debt? Check one.	S. Check all that apply		
	☐ Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Medical		
4.1	Martin Spring& Driveline	Last 4 digits of account number		\$4,934.96
3	Nonpriority Creditor's Name			Ψ+,00+.00
	2622 Douglas Ave Kalamazoo, MI 49007	When was the debt incurred?	2019	
	Number Street City State Zip Code	As of the date you file, the claim	s: Check all that apply	
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	Unliquidated		
	☐ Debtor 1 and Debtor 2 only	Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	■ Other. Specify Auto Repai	- ·	
	LI TES	Other. Specify	19	

Debtor Debtor	r 1 Kevin G. Ford r 2 Patricia L. Ford	Case number (if known)	
4.1 4	Premier Radiology	Last 4 digits of account number 3845	\$205.00
	Nonpriority Creditor's Name PO Box 3052	When was the debt incurred?	
	Indianapolis, IN 46206 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent	
	■ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Medical	
4.1 5	Receivables Management Group	Last 4 digits of account number BSZM	\$23.01
	Nonpriority Creditor's Name 2901 University Ave, #29 Columbus, GA 31907	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	☐ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Collection for Premier Radiology	
4.1 6	Rogers & Holland Nonpriority Creditor's Name	Last 4 digits of account number	\$199.00
	P.O. Box 879 Matteson, IL 60443	When was the debt incurred? 2016	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	☐ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	lacksquare At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes		
	■ res	Other. Specify Credit Card	

	1 Kevin G. Ford 2 Patricia L. Ford	Case number (if known)	
4.1	Russell Collection Agency	Last 4 digits of account number	\$303.93
	Nonpriority Creditor's Name PO Box 7009	When was the debt incurred?	_
-	Flint, MI 48507 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	□ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	$\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did no report as priority claims	ot
	No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Collection for Premier Medical Care	
.1	Synchrony Bank/Lowes	Last 4 digits of account number 9945	\$1,919.88
	Nonpriority Creditor's Name PO Box 530914 Atlanta, GA 30354	When was the debt incurred? 11/1998	
-	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did no report as priority claims	ot
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Credit card purchases	
1	TD Bank/Target Card Nonpriority Creditor's Name	Last 4 digits of account number 2842	\$9,062.41
	PO Box 673	When was the debt incurred? 2/2002	
-	Minneapolis, MN 55440 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	Пол	
	Debtor 2 only	☐ Contingent	
	Debtor 1 and Debtor 2 only	☐ Unliquidated ☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did no report as priority claims	ot
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	□Yes	■ Other. Specify Credit card purchases	

Debtor 1 Debtor 2 I	Kevin G. Patricia L			Case no	umber (if known)		
		Card Service	Last 4 digits of account number	er 3418	<u> </u>		\$11,273.98
Cro PC	Box 145	au Resolution	When was the debt incurred?	1997			
Nur	mber Street	City State Zip Code the debt? Check one.	As of the date you file, the clai	m is: Check	k all that apply		
	Debtor 1 onl	у	☐ Contingent				
	Debtor 2 onl	у	☐ Unliquidated				
	Debtor 1 and	d Debtor 2 only	☐ Disputed				
	At least one	of the debtors and another	Type of NONPRIORITY unsecu	red claim:			
_		s claim is for a community	☐ Student loans				
deb	ot	bject to offset?	Obligations arising out of a sereport as priority claims			•	
	No		Debts to pension or profit-sha			debts	
	Yes		Other. Specify Credit ca	rd purch	ases		
Part 3:	List Others	s to Be Notified About a De	bt That You Already Listed				
is trying to have more	o collect fro e than one c	m you for a debt you owe to so	about your bankruptcy, for a debt that omeone else, list the original creditor at you listed in Parts 1 or 2, list the ac or submit this page.	r in Parts 1	or 2, then list th	e collection agency here	. Similarly, if you
Name and A Frost-Arn PO Box 1	nett Comp	pany	On which entry in Part 1 or Part 2 did y Line 4.3 of (<i>Check one</i>):	☐ Part 1:	Creditors with Pri	ority Unsecured Claims	
Nashville		9	Last 4 digits of account number	■ Part 2:	Creditors with No	npriority Unsecured Claim	S
Name and A			On which entry in Part 1 or Part 2 did y		•		
REV-1 So 517 US H	ighway 3		Line 4.5 of (Check one):			ority Unsecured Claims npriority Unsecured Claim	S
Greenwo	od, IN 46	142	Last 4 digits of account number	ast 4 digits of account number 0820			
Part 4:	Add the Aı	mounts for Each Type of U	nsecured Claim				
	amounts of		ims. This information is for statistica	l reporting	purposes only.	28 U.S.C. §159. Add the	amounts for each
31					Tot	al Claim	
Total		Domestic support obligation	s	6a.	\$	0.00	
claims from Part 1		Taxes and certain other debt	s you owe the government	6b.	\$	0.00	
	6c.		injury while you were intoxicated	6c.	\$	0.00	
	6d.	Other. Add all other priority un:	secured claims. Write that amount here	. 6d.	\$	0.00	
	6e.	Total Priority. Add lines 6a thr	rough 6d.	6e.	\$	0.00	
					Tot	al Claim	
Total		Student loans		6f.	\$	0.00	
claims from Part 2			separation agreement or divorce that	6g.	\$	0.00	
	6h.	you did not report as priority Debts to pension or profit-sh	r claims paring plans, and other similar debts	6h.	\$	0.00	
	6i.	Other. Add all other nonpriority here.	vunsecured claims. Write that amount	6i.	\$	63,562.02	
	6j.	Total Nonpriority. Add lines 6	f through 6i.	6j.	\$	63,562.02	

Fill in this infor					
Debtor 1	Kevin G. Ford				
	First Name	Middle Name	Last Name		
Debtor 2	Patricia L. Ford				
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	WESTERN DISTRICT OF MICHIGAN			
Case number (if known)					☐ Check if this is an
					amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

ı	Person or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code				State what the contract or lease is for		
2.1							
	Name						
	Number	Street					
	City		State	ZIP Code			
2.2							
	Name						
	Number	Street			_		
	City		State	ZIP Code	_		
2.3	Oity		Oldio	211 0000			
	Name						
	Number	Street			<u> </u>		
	City		State	ZIP Code	<u> </u>		
2.4							
	Name						
	Number	Street			_		
	City		State	ZIP Code	_		
2.5	- ity		Ciaio	211 0000			
	Name				_		
	Number	Street					
	City		State	ZIP Code	<u> </u>		

		, 0		•	
Fill in this in	formation to identify your	case:			
Debtor 1	Kevin G. Ford				
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	Patricia L. Ford	Middle Name	Last Name		
United States	s Bankruptcy Court for the:	WESTERN DISTRICT	OF MICHIGAN		
Case numbe (if known)	r				☐ Check if this is an amended filing
	Form 106H	lahtars			·
Schedu	ile H: Your Cod	leptors			12/15
Arizona, No. G Yes. [3. In Columin line 2	again as a codebtor only	, Nevada, New Mexico, P use, or legal equivalent liv tors. Do not include you if that person is a guara	uerto Rico, Texas, Washi ve with you at the time? r spouse as a codebtor ntor or cosigner. Make	if your spouse is filing w	rates and territories include rith you. List the person shown creditor on Schedule D (Official hedule E/F, or Schedule G to fill
out Colu		ir omi rooth j, or other	dule 6 (Official Form To	oo). Ose Schedule D, Sch	neddie Lift, of Scheddie S to fill
	olumn 1: Your codebtor ne, Number, Street, City, State and 2	IP Code		Column 2: The credit Check all schedules the	or to whom you owe the debt hat apply:
3.1				☐ Schedule D, line	
Na	me			□ Schedule E/F, line	
				☐ Schedule G, line	
Nu Cit	mber Street y	State	ZIP Code	_	
				Och edule D. Per	
3.2 Na	me			_ ☐ Schedule D, line ☐ Schedule E/F, line	
				☐ Schedule G, line	
Nu	mber Street			_	
Cit		State	ZIP Code		

Fill	in this information to identify yo	ur case:						
Del	btor 1 Kevin G.	Ford						
1	btor 2 Patricia I	Ford						
Uni	ited States Bankruptcy Court for	the: WESTERN DISTRIC	T OF MICHIGAN					
1	se number nown)		_		Check if this is:	•		
						nt showing postpetition chapter as of the following date:		
	fficial Form 106l				MM / DD/ Y	YYY		
S	chedule I: Your Ir	ncome				12/15		
atta	cuse. If you are separated and ch a separate sheet to this for the control of the	m. On the top of any addit				nown). Answer every question		
١.	information.		Debtor 1		Debtor 2	or non-filing spouse		
	If you have more than one job, attach a separate page with	Employment status	☐ Employed		■ Emplo	yed		
	information about additional employers.		■ Not employed		☐ Not employed			
		Occupation			Cashier			
	Include part-time, seasonal, o self-employed work.	r Employer's name	Employer's name		Sam's Club			
	Occupation may include stude or homemaker, if it applies.	ent Employer's address				Westnedge , MI 49002		
		How long employed t	there?			4 months		
Pai	rt 2: Give Details About	Monthly Income						
	imate monthly income as of thuse unless you are separated.	e date you file this form. If	you have nothing to report fo	r any line	, write \$0 in the	space. Include your non-filing		
	ou or your non-filing spouse have e space, attach a separate shee		ombine the information for all	employe	rs for that perso	n on the lines below. If you need		
				Fo	or Debtor 1	For Debtor 2 or non-filing spouse		
2.	List monthly gross wages, s deductions). If not paid month			\$	0.00	\$820.37		

3.

0.00

0.00

+\$

\$

0.00

820.37

Estimate and list monthly overtime pay.

Calculate gross Income. Add line 2 + line 3.

Debt Debt		Kevin G. Ford Patricia L. Ford	-	(Case nun	nber (if kr	nown)					
					For De	btor 1			r Debtor n-filing s		se	
	Cop	by line 4 here	4.		\$	(0.00	\$_		820	.37	
5.	List	all payroll deductions:										
	5a.	Tax, Medicare, and Social Security deductions	5a.		\$	(0.00	\$		82	.03	
	5b.	Mandatory contributions for retirement plans	5b.		\$	(0.00	\$		0.	.00	
	5c.	Voluntary contributions for retirement plans	5c.		\$	(0.00	\$		0.	.00	
	5d.	Required repayments of retirement fund loans	5d.		\$	(0.00	\$_		0	.00	
	5e.	Insurance	5e.		\$		0.00	\$_			.00	
	5f.	Domestic support obligations	5f.		\$		0.00	\$_			.00	
	5g.	Union dues	5g.		\$		0.00	\$_			.00	
	5h.	Other deductions. Specify:	_ 5h.	.+	\$	(0.00	+ \$_		0	.00	
6.	Add	I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$	(0.00	\$_		82	.03	
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$	(0.00	\$_		738	.34	
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total										
		monthly net income.	8a.		\$	5,900	0.00	\$		0.	.00	
	8b.	Interest and dividends	8b.		\$	(0.00	\$_		0.	.00	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and proporty confilement.			\$,		\$		•	00	
	8d.	settlement, and property settlement. Unemployment compensation	8c. 8d.		\$		0.00	\$ \$.00	
	8e.	Social Security	8e.		\$	1,225	00.0	\$_	1	418	.00	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.		\$	(0.00	\$_	•	0.	.00	
	8g.	Pension or retirement income	8g.		\$).43	\$_			.00	
	8h.	Other monthly income. Specify:	_ 8h.	.+	\$	(0.00	+ \$_		0	.00	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	<u> </u>	7,845	5.43	\$_	i	1,418	8.80	
10.		culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$_	7,8	45.43	+ \$_	2,	157.14	= \$	_1	0,002.57
11.	Inclu othe	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not acify:	depe					•	Schedul	<i>∃.</i> +\$	-	0.00
12.		If the amount in the last column of line 10 to the amount in line 11. The rest is that amount on the Summary of Schedules and Statistical Summary of Certain lies							e. 12.	\$_		0,002.57
13.		you expect an increase or decrease within the year after you file this form	?								nbine nthly	ed income
		No.										
		Yes. Explain:										

Debtor 1	Fill	in this informa	tion to identify yo	our case:			1		
Debtor 2 Patricia L. Ford (Spouse, if filing) United States Bankruptery Count for the: WESTERN DISTRICT OF MICHIGAN Official Form 106J Schedule J: Your Expenses Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case unimber (if known). Answer every question. Part 1 Describe Your Household 1. Is this a joint case? No. Go to line 2. Yes. Does Debtor 2 live in a separate household? No. Go to line 2. Yes. Does Debtor 2 live in a separate household? No. On cells to belot 1 and Pyes. Fill out this information for beltor 2. Do you have dependents? No. Do not list beltor 1 and Pyes. Fill out this information for beltor 2. Do not state the dependents and any our dependents? No. Do not state the dependent and present and your dependents? No. Do not state the dependent and your dependents? No. Pyes No. Do not state the dependent and your dependents? No. Pyes No. Do not state the dependent and your dependents? No. Pyes No. No. Do not state the dependent and your dependents? No. Pyes No. No. Other state the dependent and your dependents? No. No. Other state the dependent and your dependents? No. Yes The remained your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J. check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I. Your Income (Official Form 106.) The rental or home ownership expenses to report residence. Include first mortgage payments and any rent for the ground or lot. If not included in line 4: 4a. Real estate taxes 4b. Property, homeowner's, or renter's insuranc							Che	eck if this is:	
Sponese, if fillings			TREVIII G. 1 GI	<u>u</u>				An amended filing	•
United States Bankeuptoy Court for the: WESTERN DISTRICT OF MICHIGAN Official Form 106J Schedule J: Your Expenses Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Parts: Describe Your Household 1. Is this a joint case? No. Go to line 2. Yes. Does Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2. 2. Do you have dependents? No Do not list Debtor 1 and Pages. Fill out this information for Debtor 2. Do not state the dependents names. Dependent's relationship to Dependent's relationship to Dependent's relationship to Dependent's names. Part 2. Eart 3. Do your expenses include expenses as of your bankruptry lifting date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of people other than your dependents? Yes No No Yes Part 2. Eartmante Your Ongoing Monthly Expenses Estimate your expenses and for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I; Your Income (Official Form 106J.) The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. If not included in line 4: 4a. Real estate taxes 4b. Property, homeowners, or renter's insurance 4c. Property, homeowners, or renter's insurance 4d. Home maintenance, repair, and upkeep expenses			Patricia L. Fo	ord					
Case number (It known) Comparison of the Comp			untou Court for the	· \//EQTE	DN DISTRICT OF MICHI	CAN		MM / DD / VVVV	
Official Form 106J Schedule J: Your Expenses Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part Describe Your Household	Unit	ed States Bankr	uptcy Court for the	WESTE	KN DISTRICT OF MICHI	GAN		MIMI / DD / YYYY	
Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct information, if more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Rat Describe Your Household	1								
Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information, if more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1:	Of	fficial Fo	rm 106J						
information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if Known). Answer every question. Patt Describe Your Household	So	chedule	J: Your l	Expen	ses				12/1
1. Is this a joint case? No. Go to line 2. Yes. Does Debtor 2 live in a separate household? No Do not list Debtor 1 and Debtor 2. Do not list Debtor 1 and Debtor 2. Do not state the dependents? Do not state the dependents names. No Yes No Yes 3. Do your expenses include expenses of people other than yourself and your dependents? Part 2: Estimate Your Ongoing Monthly Expenses Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filled. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106I.) If not included in line 4: 4a. Real estate taxes 4a. \$ 0.00 4b. Property, homeowner's, or renter's insurance 4c. \$ 0.00 4d. Home owner's association or condominium dues 4d. \$ 0.00 4d. Home maintenance, repair, and upkeep expenses 4d. \$ 0.00 4d. Home owner's association or condominium dues	info	ormation. If m	ore space is ne	eded, atta	ch another sheet to this				
No. Go to line 2.				hold					
Yes. Does Debtor 2 live in a separate household? No	1.	_							
No Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2. 2. Do you have dependents? No Do not list Debtor 1 and Debtor 2. Do not state the dependents names. Dependent live with you?		_		in a sonars	ate household?				
Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2. 2. Do you have dependents?				iii a sepait	ate nousenoiu:				
Do not list Debtor 1 and				st file Officia	al Form 106J-2, Expenses	s for Separate House	ehold of De	btor 2.	
Debtor 2. Debtor 1 or Debtor 2 age live with you? Do not state the dependents names. Debtor 1 or Debtor 2 age live with you? No Yes No Yes No Yes No No Yes No Yes No No Yes Solution No Your expenses as of packed the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106L.) If not included in line 4: 4a. Real estate taxes 4b. Property, homeowner's, or renter's insurance 4b. Property, homeowner's, or renter's insurance 4c. Home maintenance, repair, and upkeep expenses 4d. Solution Add Homeowner's association or condominium dues 4d. Solution Only Add Homeowner's association or condominium dues 4d. Solution Only Add Homeowner's association or condominium dues 4d. Solution Only Add Homeowner's association or condominium dues 4d. Solution Only Add Homeowner's association or condominium dues 4d. Solution Only Add Homeowner's association or condominium dues 4d. Solution Only Add Homeowner's association or condominium dues 4d. Solution Only Add Homeowner's association or condominium dues 4d. Solution Only Add Homeowner's association or condominium dues 4d. Solution Only Add Homeowner's association or condominium dues 4d. Solution Only Add Homeowner's association or condominium dues 4d. Solution Only Add Homeowner's association or condominium dues 4d. Solution Only Add Homeowner's association or condominium dues Add Homeowner's association or condominium dues Add Homeowner's association or condominium dues Add Homeowner	2.	Do you have	e dependents?	■ No					
dependents names. Yes No No Yes No Yes No No Yes Yes No Yes Yes			ebtor 1 and	☐ Yes.				•	
3. Do your expenses include expenses of people other than yourself and your dependents? Part 2:									=
3. Do your expenses include expenses of people other than yourself and your dependents? Part 2: Estimate Your Ongoing Monthly Expenses Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106I.) If not included in line 4: 4a. Real estate taxes 4a. \$ 0.00 4b. \$ 0.00 4c. Home maintenance, repair, and upkeep expenses 4c. \$ 100.00 4d. Homeowner's association or condominium dues 4d. \$ 0.00		aepenaents	names.						- = :
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Part 2: Estimate Your Ongoing Monthly Expenses Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106I.) 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. 4. \$ 0.00 If not included in line 4: 4a. Real estate taxes 4b. Property, homeowner's, or renter's insurance 4c. Home maintenance, repair, and upkeep expenses 4d. \$ 0.00 4d. Homeowner's association or condominium dues	3.			han	No				_
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the value of such assistance and have included it on Schedule I: Your Income (Official Form 106L) 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. 4. \$ 0.00 If not included in line 4: 4a. Real estate taxes 4b. Property, homeowner's, or renter's insurance 4c. Home maintenance, repair, and upkeep expenses 4d. \$ 0.00 4d. Homeowner's association or condominium dues 4d. \$ 0.00	Est	imate your ex enses as of a	penses as of yo	our bankru	uptcy filing date unless y	ou are using this followed are using the second of the sec	form as a s e <i>J</i> , check	supplement in a Ch the box at the top	napter 13 case to report of the form and fill in the
the value of such assistance and have included it on Schedule I: Your Income (Official Form 106L) 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. 4. \$ 0.00 If not included in line 4: 4a. Real estate taxes 4b. Property, homeowner's, or renter's insurance 4c. Home maintenance, repair, and upkeep expenses 4d. \$ 0.00 4d. Homeowner's association or condominium dues 4d. \$ 0.00	Inc	lude expense	s paid for with r	non-cash g	government assistance i	if you know			
4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. If not included in line 4: 4a. Real estate taxes 4b. Property, homeowner's, or renter's insurance 4c. Home maintenance, repair, and upkeep expenses 4d. Homeowner's association or condominium dues 4. \$ 0.00 4b. \$ 0.00 4c. Homeowner's association or condominium dues 4d. \$ 0.00 4d. \$ 0.00				d have inc	luded it on Schedule I:	Your Income		Your ex	penses
payments and any rent for the ground or lot. If not included in line 4: 4a. Real estate taxes 4b. Property, homeowner's, or renter's insurance 4c. Home maintenance, repair, and upkeep expenses 4d. Homeowner's association or condominium dues 4d. \$ 0.00 4d. \$ 0.00 4d. \$ 0.00	(0.	ilciai i oilii io	,01.)				_		
4a. Real estate taxes 4b. Property, homeowner's, or renter's insurance 4c. Home maintenance, repair, and upkeep expenses 4d. Homeowner's association or condominium dues 4d. \$ 0.00 100 100 100 100 100 100 1	4.					nclude first mortgag	e 4.	\$	0.00
4b. Property, homeowner's, or renter's insurance 4c. Home maintenance, repair, and upkeep expenses 4d. Homeowner's association or condominium dues 4d. \$ 0.00 100.00		If not includ	led in line 4:						
4b. Property, homeowner's, or renter's insurance 4c. Home maintenance, repair, and upkeep expenses 4d. Homeowner's association or condominium dues 4d. \$ 0.00 100.00		4a. Real e	estate taxes				4a.	\$	0.00
4d. Homeowner's association or condominium dues 4d. \$ 0.00		4b. Prope	rty, homeowner's						
· · · · · · · · · · · · · · · · · · ·								· ———	
	5.					me equity loans		·	

	tor 1	Kevin G.				
Deb	tor 2	Patricia	L. Ford	Case num	nber (if known)	
6.	Utilit					
	6a.	-	, heat, natural gas	6a.	· —	277.00
	6b.	•	wer, garbage collection	6b.	\$	100.00
	6c.	•	e, cell phone, Internet, satellite, and cable services	6c.	\$	342.00
	6d.	Other. Spe	ecify:	6d.	\$	0.00
7.	Food	d and house	ekeeping supplies	7.	\$	500.00
8.	Child	dcare and c	children's education costs	8.	\$	0.00
9.	Cloth	hing, laund	ry, and dry cleaning	9.	\$	100.00
10.		-	products and services	10.	\$	100.00
11.		•	ntal expenses	11.	\$	300.00
			Include gas, maintenance, bus or train fare.			300.00
12.			ar payments.	12.	\$	300.00
13.			clubs, recreation, newspapers, magazines, and books	13.	\$	50.00
14.			ributions and religious donations	14.	·	100.00
		rance.				100.00
10.			nsurance deducted from your pay or included in lines 4 or 20			
		Life insura		15a.	\$	0.00
		Health ins		15b.	·	0.00
		Vehicle ins		15c.		195.00
				15d. 15d.	·	
40			rance. Specify:		Φ	0.00
16.	Spec		clude taxes deducted from your pay or included in lines 4 or	20.	\$	0.00
47	•	,			Φ	0.00
17.			ease payments: ents for Vehicle 1	17a.	¢	0.00
		, ,				0.00
			ents for Vehicle 2	17b.	· ———	0.00
		Other. Spe		17c.	*	0.00
		Other. Spe		17d.	\$	0.00
18.			of alimony, maintenance, and support that you did not r		c	0.00
			your pay on line 5, Schedule I, Your Income (Official For	m 106I). 18.	· · · · · · · · · · · · · · · · · · ·	
19.			s you make to support others who do not live with you.		\$	0.00
	Spec	,		19.		
20.			erty expenses not included in lines 4 or 5 of this form or			
			s on other property	20a.	·	0.00
	20b.	Real estat	te taxes	20b.	\$	0.00
	20c.	Property, h	homeowner's, or renter's insurance	20c.	\$	0.00
	20d.	Maintenan	nce, repair, and upkeep expenses	20d.	\$	1,138.00
	20e.	Homeown	er's association or condominium dues	20e.	\$	0.00
21.	Othe	r: Specify:		21.	+\$	0.00
		. ,			·	
22.		-	monthly expenses			
			through 21.		\$	3,602.00
	22b.	Copy line 22	2 (monthly expenses for Debtor 2), if any, from Official Form	106J-2	\$	
	22c.	Add line 22a	a and 22b. The result is your monthly expenses.		\$	3,602.00
			,,,,			0,002.00
23.			monthly net income.			
	23a.	Copy line	12 (your combined monthly income) from Schedule I.	23a.	\$	10,002.57
	23b.	Copy your	monthly expenses from line 22c above.	23b.	-\$	3,602.00
						<u> </u>
	23c.	Subtract y	our monthly expenses from your monthly income.			0.400.57
		The result	is your monthly net income.	23c.	\$	6,400.57
24.			an increase or decrease in your expenses within the yea			
			ou expect to finish paying for your car loan within the year or do you e	expect your mortgage	payment to increa	se or decrease because of a
			terms of your mortgage?			
	■ N					
	□ Ye	es.	Explain here:			

Fill	in this information to identify your	case:			
Deb	tor 1 Kevin G. Ford First Name	Middle Name	Last Name		
Deb	tor 2 Patricia L. Ford	Wildle Name	Lastivanie		
(Spo	rise if, filing) First Name	Middle Name	Last Name		
Uni	ed States Bankruptcy Court for the:	WESTERN DISTRICT (OF MICHIGAN		
Cas	e number				
(if kn	own)			_	ck if this is an nded filing
					· ·
∩f	icial Form 106Sum				
		and Liahilities ar	nd Certain Statistical Information		12/15
			are filing together, both are equally responsible f	or supply	12/15 ing correct
info		es first; then complete th	ne information on this form. If you are filing amend		
Par	1: Summarize Your Assets				
					assets of what you own
				value	or what you own
1.	Schedule A/B: Property (Official Formal 1a. Copy line 55, Total real estate, formal 1a. Copy line 55, Total	orm 106A/B) rom Schedule A/B		\$	522,500.00
	1b. Copy line 62, Total personal pro	perty, from Schedule A/B		\$	26,520.00
	1c. Copy line 63, Total of all propert	y on Schedule A/B		\$	549,020.00
Par	2: Summarize Your Liabilities				
				Your	liabilities
					nt you owe
2.	Schedule D: Creditors Who Have C 2a. Copy the total you listed in Colu		(Official Form 106D) the bottom of the last page of Part 1 of Schedule D	\$	457,444.28
2	,		1 0		
3.	Schedule E/F: Creditors Who Have 3a. Copy the total claims from Part		ns) from line 6e of <i>Schedule E/F</i>	\$	0.00
	3b. Copy the total claims from Part	2 (nonpriority unsecured c	laims) from line 6j of Schedule E/F	\$	63,562.02
			Your total liabilities	\$	521,006.30
			, our total mashines		321,000.30
Par	3: Summarize Your Income and	Expenses			
4.	Schedule I: Your Income (Official Fo				
٦.			· I	\$	10,002.57
5.	Schedule J: Your Expenses (Officia Copy your monthly expenses from li			\$	3,602.00
Par	4: Answer These Questions for	Administrative and Stati	istical Records		
6.	Are you filing for bankruptcy und	•	hool, this hay and authorit this form to the court with ye	ur othor o	
	_	on this part of the form. C	heck this box and submit this form to the court with yo	ui Ulilei SC	STEGUIES.
7.	■ Yes What kind of debt do you have?				
			debts are those "incurred by an individual primarily for og for statistical purposes. 28 U.S.C. § 159.	a persona	ıl, family, or
	Your debts are not primarily the court with your other sched		ve nothing to report on this part of the form. Check this	s box and	submit this form to

Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information

page 1 of 2

Debtor 2	Patricia L. Ford					_	Case	ase number (if known)					

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

3,678.00

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

Debtor 1 Kevin G. Ford

	Total claim	
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

Fill in this infor	mation to identify your	case:			
Debtor 1	Kevin G. Ford				
20010.	First Name	Middle Name	Last Name		
Debtor 2	Patricia L. Ford				
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	WESTERN DISTRICT C	DF MICHIGAN		
Case number					
(if known)				☐ Check if t amended	
If two married p You must file thiobtaining mone	tion About a	r, both are equally respo le bankruptcy schedules n connection with a bank	Debtor's Sched Insible for supplying correct info or amended schedules. Making truptcy case can result in fines u	rmation. a false statement, concealing p	
	n Below	one who is NOT an attor	ney to help you fill out bankrupt	cv forms?	
■ No	.,g p., oomo		,	-,	
_	Name of person			Attach Bankruptcy Petition Prepa Declaration, and Signature (Office	
•	alty of perjury, I declare re true and correct.	that I have read the sum	mary and schedules filed with th	nis declaration and	
X /s/ Kev	vin G. Ford		X /s/ Patricia L. Ford	İ	
	G. Ford		Patricia L. Ford		
Signatu	ire of Debtor 1		Signature of Debtor 2		
Date	June 20. 2019		Date June 20, 20	19	

Fill	in this inforn	nation to identify you	r case:			
	otor 1	Kevin G. Ford				
		First Name	Middle Name	Last Name		
	otor 2	Patricia L. Ford				
(Spoi	use if, filing)	First Name	Middle Name	Last Name		
Unit	ed States Ba	nkruptcy Court for the:	WESTERN DISTRICT O	F MICHIGAN		
Cas (if kn	e number _				_	Check if this is an mended filing
Sta		of Financial	Affairs for Indivious		Bankruptcy e equally responsible for sup	4/19
		ore space is needed, n). Answer every ques	•	this form. On the top of a	ny additional pages, write you	ir name and case
Par	Give D	etails About Your Ma	rital Status and Where You	u Lived Before		
1.	What is you	current marital statu	ıs?			
	■ Married□ Not mar	ried				
2.	During the la	ast 3 vears, have vou	lived anywhere other than	where you live now?		
	■ No □ Yes. Lis	t all of the places you l	ived in the last 3 years. Do n	ot include where you live no	w.	
	Debtor 1 Pr	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior A	ddress:	Dates Debtor 2 lived there
					nity property state or territory Rico, Texas, Washington and W	
	■ No					
	☐ Yes. Ma	ke sure you fill out Sch	nedule H: Your Codebtors (O	official Form 106H).		
Par	Explai	n the Sources of You	r Income			
4.	Fill in the total	al amount of income yo	nployment or from operatir u received from all jobs and have income that you receiv	all businesses, including pa		ndar years?
	□ No					
	Yes. Fill	in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year until d for bankruptcy:	☐ Wages, commissions, bonuses, tips	\$0.00	■ Wages, commissions, bonuses, tips	\$4,115.64
			☐ Operating a business		☐ Operating a business	

Official Form 107

Debtor 2 Patricia L. Ford	ı	Cas	e number (if known)	
	Debtor 1		Debtor 2	
	Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
For last calendar year: (January 1 to December 31,	2018) Wages, commissions bonuses, tips	\$0.00	■ Wages, commissions, bonuses, tips	\$9,435.00
	☐ Operating a business		☐ Operating a business	
For the calendar year befor (January 1 to December 31,		, \$0.00	■ Wages, commissions, bonuses, tips	\$0.00
	☐ Operating a business		☐ Operating a business	
List each source and the No Yes. Fill in the detai	gross income from each source sepa	arately. Do not include income t	nat you listed in line 4.	
	Debtor 1 Sources of income Describe below.	Gross income from each source (before deductions and	Debtor 2 Sources of income Describe below.	Gross income (before deductions and exclusions)
From January 1 of current y		exclusions) \$4,959.24		
	Social Security	\$7,350.00	Social Security	\$8,512.80
	Rental Income	\$35,400.00		
For last calendar year: (January 1 to December 31,	Pension 2018)	\$9,918.48	Lottery winnings	\$24,240.00
	Social Security	\$14,700.00	Social Security	\$17,760.00
	Rental Income	\$75,028.00		
For the calendar year befor (January 1 to December 31,		\$9,918.48	Lottery winnings	\$8,124.00
	Social Security	\$14,000.00	Social Security	\$17,000.00
	Rental Income	\$74,075.00		
Part 3: List Certain Paym	nents You Made Before You Filed f	or Bankruptcv		
6. Are either Debtor 1's or	Debtor 2's debts primarily consur or 1 nor Debtor 2 has primarily con narily for a personal, family, or house	mer debts? nsumer debts. Consumer debts	s are defined in 11 U.S.C. § 10	01(8) as "incurred by an
□ No. G	days before you filed for bankruptcy to to line 7.	, did you pay any creditor a tota	I of \$6,825* or more?	
	ist below each creditor to whom you aid that creditor. Do not include payn			

Debtor 1	Kevin G. Ford		
Debtor 2	Patricia L. Ford	Case number (if known)	

Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts.

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

□ No. Go to line 7.

Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this payment for
Lake Michigan Credit Union PO Box 2848 Grand Rapids, MI 49501	monthly	\$1,532.22	\$77,190.00	■ Mortgage □ Car □ Credit Card □ Loan Repayment □ Suppliers or vendors □ Other
Lake Michigan Credit Union PO Box 2848 Grand Rapids, MI 49501	monthly	\$711.05	\$45,120.68	■ Mortgage □ Car □ Credit Card □ Loan Repayment □ Suppliers or vendors □ Other
Lake Michigan Credit Union PO Box 2848 Grand Rapids, MI 49501	monthly	\$895.78	\$37,976.55	■ Mortgage □ Car □ Credit Card □ Loan Repayment □ Suppliers or vendors □ Other
Lake Michigan Credit Union PO Box 2848 Grand Rapids, MI 49501	monthly	\$911.42	\$42,801.63	■ Mortgage □ Car □ Credit Card □ Loan Repayment □ Suppliers or vendors □ Other
Lake Michigan Credit Union PO Box 2848 Grand Rapids, MI 49501	monthly	\$1,179.10	\$45,054.22	■ Mortgage □ Car □ Credit Card □ Loan Repayment □ Suppliers or vendors □ Other
Mr. Cooper 8950 Cypress Waters Blvd Coppell, TX 75019	montly	\$883.62	\$45,233.03	■ Mortgage □ Car □ Credit Card □ Loan Repayment □ Suppliers or vendors □ Other

not include payments to an attorney for this bankruptcy case.

* Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment.

	btor 1 Kevin G. Ford btor 2 Patricia L. Ford		Ca:	se number (if known)		
	Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this p	ayment for
	Lake Michigan Credit Union PO Box 2848 Grand Rapids, MI 49501	monthly	\$901.88	\$38,948.75	■ Mortgag □ Car □ Credit C □ Loan Re □ Supplier □ Other	ard epayment s or vendors
	Member First Mortgage 616 44th Street SE Grand Rapids, MI 49548	monthly	\$926.98	\$102,636.00	■ Mortgag □ Car □ Credit C □ Loan Re □ Supplier □ Other	ard payment s or vendors
7.	Within 1 year before you filed for bankrup <i>Insiders</i> include your relatives; any general p of which you are an officer, director, person is a business you operate as a sole proprietor. alimony.	artners; relatives of any gen control, or owner of 20%	neral partners; partnorners or more of their votin	erships of which you	u are a gener ny managing	al partner; corporations agent, including one for
	No☐ Yes. List all payments to an insider.					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason fo	r this payment
8.	Within 1 year before you filed for bankrup insider? Include payments on debts guaranteed or co		yments or transfer	any property on a	ccount of a c	lebt that benefited an
	Yes. List all payments to an insider Insider's Name and Address	Dates of payment	Total amount	Amount you	Reason fo	r this payment
			paid	still owe		ditor's name
Pa	rt 4: Identify Legal Actions, Repossession	ns, and Foreclosures				
9.	Within 1 year before you filed for bankrup List all such matters, including personal injury modifications, and contract disputes. ■ No □ Yes. Fill in the details.					
	Case title Case number	Nature of the case	Court or agency	•	Status of t	he case
10.	Within 1 year before you filed for bankrup Check all that apply and fill in the details belo		perty repossessed,	foreclosed, garnis	hed, attache	d, seized, or levied?
	No. Go to line 11.					
	Yes. Fill in the information below. Creditor Name and Address	Describe the Property		Date		Value of the
		Explain what happene		_ 3.0		property
		,				

	otor 1 Kevin G. Ford Patricia L. Ford		Case number	(if known)					
11.	11. Within 90 days before you filed for bankruptcy accounts or refuse to make a payment becaus ■ No □ Yes. Fill in the details.			stitution, set off any	amounts from your				
	Creditor Name and Address	Des	scribe the action the creditor took	Date action was taken	Amount				
12.	Within 1 year before you filed for bankrupt court-appointed receiver, a custodian, or a		as any of your property in the possession of an er official?	assignee for the ben	efit of creditors, a				
	□ Yes								
Pai	t 5: List Certain Gifts and Contributions								
13.	Within 2 years before you filed for bankrup ■ No □ Yes. Fill in the details for each gift.	otcy, c	did you give any gifts with a total value of more t	han \$600 per person	?				
	Gifts with a total value of more than \$600 per person Berson to Whom You Gave the Gift and		Describe the gifts	Dates you gave the gifts	Value				
	Person to Whom You Gave the Gift and Address:								
14.	□ No	-	did you give any gifts or contributions with a tot	al value of more than	\$600 to any charity?				
	Yes. Fill in the details for each gift or contribution.								
	Gifts or contributions to charities that tot more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)	aı	Describe what you contributed	Dates you contributed	Value				
	Galilee Baptist Church 1216 N Westnedge Kalamazoo, MI 49007		\$100.00	Monthly	\$600.00				
	<u> </u>								
Pai	t 6: List Certain Losses								
15.	Within 1 year before you filed for bankrupt or gambling?	cy or	since you filed for bankruptcy, did you lose any	thing because of the	ft, fire, other disaster,				
	■ No □ Yes. Fill in the details.								
		escri	be any insurance coverage for the loss	Date of your	Value of property				
			the amount that insurance has paid. List pending nee claims on line 33 of Schedule A/B: Property.	loss	lost				
Pai	t 7: List Certain Payments or Transfers								
16.	consulted about seeking bankruptcy or pre	eparir	d you or anyone else acting on your behalf paying a bankruptcy petition? s, or credit counseling agencies for services require		erty to anyone you				
	□ No								
	Yes. Fill in the details.								
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	u	Description and value of any property transferred	Date payment or transfer was made	Amount of payment				

Debtor 1 Kevin G. Ford
Debtor 2 Patricia L. Ford

Case number (if known)

	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and variansferred	value of any prope	rty	Date payment or transfer was made	Amount of payment
	Kerry Hettinger PLC 4341 South Westnedge Avenue Suite 1202 Kalamazoo, MI 49008 khett57@hotmail.com	Attorney Fees				\$300.00
	Access Counseling	Prefiling couns	eling			\$25.00
 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. No Yes. Fill in the details. 						rty to anyone who
	Person Who Was Paid Address	Description and variansferred	value of any prope	rty	Date payment or transfer was made	Amount of payment
18.	Within 2 years before you filed for bankruptcy transferred in the ordinary course of your bus include both outright transfers and transfers mad include gifts and transfers that you have already No Yes. Fill in the details.	siness or financial affa e as security (such as	airs? the granting of a se			
	Person Who Received Transfer Address Person's relationship to you				iny property or received or debts change	Date transfer was made
19.	Within 10 years before you filed for bankrupto beneficiary? (These are often called asset-protein No Yes. Fill in the details.		ny property to a se	lf-settled tru	st or similar device	of which you are a
	Name of trust	Description and	Description and value of the property transferred			Date Transfer was made
Par	t 8: List of Certain Financial Accounts, Insti	ruments, Safe Deposi	t Boxes, and Stora	age Units		
20.	 Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. No Yes. Fill in the details. 					
		ast 4 digits of account number	Type of account instrument	clo mo	e account was sed, sold, ved, or nsferred	Last balance before closing or transfer

Del	tor 2 Patricia L. Ford		Case number (if known)	
21.	Do you now have, or did you have within 1 year cash, or other valuables?	before you filed for bankruptcy, ar	ny safe deposit box or other deposito	ory for securities,
	■ No			
	Yes. Fill in the details.			
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?
22.	Have you stored property in a storage unit or pl	lace other than your home within 1	year before you filed for bankruptcy	?
	No			
	Yes. Fill in the details.			
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?
Pai	19: Identify Property You Hold or Control for	Someone Else		
23.	Do you hold or control any property that someofor someone.	one else owns? Include any propert	y you borrowed from, are storing for	r, or hold in trust
	■ No □ Yes. Fill in the details.			
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value
Pai	10: Give Details About Environmental Information	ation		
For	he purpose of Part 10, the following definitions	apply:		
	Environmental law means any federal, state, or toxic substances, wastes, or material into the a regulations controlling the cleanup of these sul	ir, land, soil, surface water, ground		
	Site means any location, facility, or property as to own, operate, or utilize it, including disposal	defined under any environmental l	aw, whether you now own, operate,	or utilize it or used
	Hazardous material means anything an environ hazardous material, pollutant, contaminant, or		waste, hazardous substance, toxic s	substance,
Rep	ort all notices, releases, and proceedings that yo	ou know about, regardless of when	they occurred.	
24.	Has any governmental unit notified you that you	u may be liable or potentially liable	under or in violation of an environme	ental law?
	■ No □ Yes. Fill in the details.			
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice
25.	Have you notified any governmental unit of any	release of hazardous material?		
	■ No □ Yes. Fill in the details.			
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice

Debtor 1 Kevin G. Ford

	tor 1 Kevin G. Ford tor 2 Patricia L. Ford		Case r	number (if known)		
26.	Have you been a party in any judicial or adm	inistrative proceeding under any envir	ronmen	tal law? Include settlements a	nd orders.	
	■ No □ Yes. Fill in the details.					
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature	e of the case	Status of the case	
Par	11: Give Details About Your Business or C	Connections to Any Business				
27.	Within 4 years before you filed for bankrupto A sole proprietor or self-employed in A member of a limited liability compa	a trade, profession, or other activity,	either f	full-time or part-time	business?	
	☐ A partner in a partnership		. ,	•		
	☐ An officer, director, or managing exe	cutive of a corporation				
	☐ An owner of at least 5% of the voting or equity securities of a corporation					
	■ No. None of the above applies. Go to Pa	art 12.				
	Yes. Check all that apply above and fill i	in the details below for each business				
	Business Name Address (Number, Street, City, State and ZIP Code)	Describe the nature of the business Name of accountant or bookkeeper	D	mployer Identification number o not include Social Security n ates business existed	umber or ITIN.	

28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.

No

☐ Yes. Fill in the details below.

Name

Address (Number, Street, City, State and ZIP Code) Date Issued

Debtor 1 Debtor 2	Kevin G. Ford Patricia L. Ford			Case number (if known)	
20010. 2	Tatiola E. Ford				
Part 12:	Sign Below				
are true ai with a bar	d the answers on this <i>Statement of Financial A</i> and correct. I understand that making a false stankruptcy case can result in fines up to \$250,000 §§ 152, 1341, 1519, and 3571.	atement,	concealing proper	ty, or obtaining money or	
/s/ Kevir	n G. Ford	/s/ Pat	tricia L. Ford		
Kevin G	. Ford	Patric	ia L. Ford		
Signature	e of Debtor 1	Signati	ure of Debtor 2		
Date Ju	une 20, 2019	Date	June 20, 2019		
Did you at ■ No □ Yes	ttach additional pages to Your Statement of Fin	nancial A	Affairs for Individua	ls Filing for Bankruptcy (C	rfficial Form 107)?
Did you pa	ay or agree to pay someone who is not an atto	rney to h	nelp you fill out ban	kruptcy forms?	
☐ Yes. Na	ame of Person . Attach the Bankruptcy Peti	ition Prep	arer's Notice. Declar	ration, and Signature (Officia	al Form 119).

Fill in this inform	Fill in this information to identify your case:					
Debtor 1	Kevin G. Ford					
Debtor 2 (Spouse, if filing)	Patricia L. Ford					
United States Bankruptcy Court for the: Western District of Michigan						
Case number (if known)						

Check as directed in lines 17 and 21:							
According to the calculations required by this Statement:							
	1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).						
	2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).						
	3. The commitment period is 3 years.						
	4. The commitment period is 5 years.						

☐ Check if this is an amended filing

Official Form 122C-1

Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Part 1: Calculate Your Average Monthly Income

- 1. What is your marital and filing status? Check one only.
 - □ Not married. Fill out Column A, lines 2-11.
 - Married. Fill out both Columns A and B, lines 2-11.

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

			Colum. Debto		Colum Debto non-fi	
 Your gross wages, salary, tips, bonuses, overtime payroll deductions). 	e, and co	ommissions (before a	II \$	0.00	\$	815.02
 Alimony and maintenance payments. Do not include Column B is filled in. 	de payme	ents from a spouse if	\$	0.00	\$	0.00
 All amounts from any source which are regularly of you or your dependents, including child support from an unmarried partner, members of your househout and roommates. Do not include payments from a spoyou listed on line 3. Net income from operating a business, profession, or farm 	rt. Includ	le regular contributions dependents, parents, not include payments		0.00	\$	0.00
Gross receipts (before all deductions)	\$	0.00				
Ordinary and necessary operating expenses	- \$ _	0.00				
Net monthly income from a business, profession, or fa	arm\$_	0.00 Copy here	> \$	0.00	\$	0.00
. Net income from rental and other real property	Debtoi	r 1				
Gross receipts (before all deductions) \$		5,900.00				
Ordinary and necessary operating expenses -\$	i	3,863.56				
Net monthly income from rental or other real property \$;	Copy 2,036.44 here -	> \$	2,036.44	\$	0.00

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

Debtor Debtor				Case numl	oer (<i>if known</i>)			
								_
				Column A Debtor 1	1	Column B Debtor 2 o		
7.	Interest, dividends, and royalties			\$	0.00	\$	0.00	
	Unemployment compensation			\$	0.00	\$	0.00	
	Do not enter the amount if you contend that the an the Social Security Act. Instead, list it here:	nount received was a be	enefit under					
	For you		0.00					
	For your spouse		0.00					
	Pension or retirement income. Do not include ar benefit under the Social Security Act.	ny amount received that	was a	\$	826.54	\$	0.00	
	Income from all other sources not listed above Do not include any benefits received under the So received as a victim of a war crime, a crime agains domestic terrorism. If necessary, list other sources total below.	cial Security Act or payrest humanity, or internation	ments onal or					
				\$	0.00	\$	0.00	
				\$	0.00	\$	0.00	
	Total amounts from separate pages, if an	y.	+	\$	0.00	\$	0.00	
	Calculate your total average monthly income. A each column. Then add the total for Column A to the state of the column and the total for Column A to the state of the column and the column are stated as the column and the column are stated as the column are st		s	2,862.98	+ \$ _	815.02	= \$ 3,678.00)
Part . 12.	Determine How to Measure Your Deduct Copy your total average monthly income from						Total average monthly income \$ 3,678.00	
	Calculate the marital adjustment. Check one:							_
	You are not married. Fill in 0 below.							
	You are married and your spouse is filing with	•						
	You are married and your spouse is not filing Fill in the amount of the income listed in line 'dependents, such as payment of the spouse's	11, Column B, that was						
	Below, specify the basis for excluding this incadjustments on a separate page.		income dev	oted to ea	ch purpose	e. If necessary	, list additional	
	If this adjustment does not apply, enter 0 belo	DW.	\$					
	·							
			+\$					
	Total		\$	0.	00 Co	ppy here=>	0.	.00
14.	Your current monthly income. Subtract line 13	from line 12.					\$ 3,678.00)
15.	Calculate your current monthly income for the	e year. Follow these ste	eps:					
	15a. Copy line 14 here=>						\$3,678.00)
	Multiply line 15a by 12 (the number of mon						x 12	
	15b. The result is your current monthly income f	or the year for this part	of the form.				\$ 44,136.00	_

Kevin G. Ford

Patricia L. Ford Debtor 2 Case number (if known) 16. Calculate the median family income that applies to you. Follow these steps: 16a. Fill in the state in which you live. 2 16b. Fill in the number of people in your household. 62.618.00 16c. Fill in the median family income for your state and size of household. To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. 17. How do the lines compare? Line 15b is less than or equal to line 16c. On the top of page 1 of this form, check box 1, Disposable income is not determined under 11 U.S.C. § 1325(b)(3). Go to Part 3. Do NOT fill out Calculation of Your Disposable Income (Official Form 122C-2). Line 15b is more than line 16c. On the top of page 1 of this form, check box 2, Disposable income is determined under 11 U.S.C. § 17b. 1325(b)(3). Go to Part 3 and fill out Calculation of Your Disposable Income (Official Form 122C-2). On line 39 of that form, copy your current monthly income from line 14 above. Part 3: Calculate Your Commitment Period Under 11 U.S.C. § 1325(b)(4) 18. Copy your total average monthly income from line 11. \$ 3,678.00 19. Deduct the marital adjustment if it applies. If you are married, your spouse is not filing with you, and you contend that calculating the commitment period under 11 U.S.C. § 1325(b)(4) allows you to deduct part of your spouse's income, copy the amount from line 13. 0.00 19a. If the marital adjustment does not apply, fill in 0 on line 19a. 3,678.00 19b. Subtract line 19a from line 18. \$ 20. Calculate your current monthly income for the year. Follow these steps: 3,678.00 20a. Copy line 19b Multiply by 12 (the number of months in a year). x 12 \$ 44.136.00 20b. The result is your current monthly income for the year for this part of the form 62,618.00 \$ 20c. Copy the median family income for your state and size of household from line 16c 21. How do the lines compare? Line 20b is less than line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 3, *The commitment* period is 3 years. Go to Part 4. Line 20b is more than or equal to line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 4, The commitment period is 5 years. Go to Part 4. Part 4: Sign Below By signing here, under penalty of perjury I declare that the information on this statement and in any attachments is true and correct. X /s/ Kevin G. Ford X /s/ Patricia L. Ford Kevin G. Ford Patricia L. Ford Signature of Debtor 1 Signature of Debtor 2 Date June 20, 2019 Date June 20, 2019 MM / DD / YYYY MM / DD / YYYY If you checked 17a, do NOT fill out or file Form 122C-2. If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above.

Kevin G. Ford

Debtor 1

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation	
\$245	filing fee	
\$75	administrative fee	
+ \$15	trustee surcharge	
\$335	total fee	

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

B 201B (Form 201B) (12/09)

Kevin G. Ford

Case No. (if known)

United States Bankruptcy Court Western District of Michigan

In re	Patricia L. Ford		Case No.					
		Debtor(s)	Chapter	13				
CERTIFICATION OF NOTICE TO CONSUMER DEBTOR(S) UNDER § 342(b) OF THE BANKRUPTCY CODE Certification of Debtor I (We), the debtor(s), affirm that I (we) have received and read the attached notice, as required by § 342(b) of the Bank Code.								
Printed	d Name(s) of Debtor(s)	Signature of I	Debtor	Date				

X /s/ Patricia L. Ford

Signature of Joint Debtor (if any)

June 20, 2019

Date

Instructions: Attach a copy of Form B 201 A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) only if the certification has NOT been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Western District of Michigan

In re	Kevin G. Ford Patricia L. Ford		Case No.			
	T dillold El Told	Debtor(s)	Chapter	13		
1. F	DISCLOSURE OF COMPENS Pursuant to 11 U. S.C. § 329(a) and Fed. Bankr. P. 2016(b)			. ,	at	
1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:						
	For legal services, I have agreed to accept			3,200.00		
	Prior to the filing of this statement I have received		\$	300.00		
	Balance Due		\$	2,900.00		
2. 7	The source of the compensation paid to me was:					
	■ Debtor □ Other (specify):					
3. 7	The source of compensation to be paid to me is:					
	■ Debtor □ Other (specify):					
4. I	■ I have not agreed to share the above-disclosed compen	sation with any other persor	unless they are mem	bers and associates	of my law firm.	
I	☐ I have agreed to share the above-disclosed compensation copy of the agreement, together with a list of the name				law firm. A	
5. 1	In return for the above-disclosed fee, I have agreed to reno	der legal service for all aspec	ets of the bankruptcy c	ase, including:		
b c	 Analysis of the debtor's financial situation, and rendering Preparation and filing of any petition, schedules, stateng Representation of the debtor at the meeting of creditors [Other provisions as needed] 	nent of affairs and plan which	h may be required;		nkruptcy;	
6. I	By agreement with the debtor(s), the above-disclosed fee dependence of the debtors in any disclosed any other adversary proceeding.	loes not include the followin hargeability actions, jud	g service: icial lien avoidance	es, relief from st	ay actions or	
		CERTIFICATION				
	certify that the foregoing is a complete statement of any a ankruptcy proceeding.	agreement or arrangement fo	or payment to me for re	epresentation of the	debtor(s) in	
Ju	une 20, 2019	/s/ Kerry Hetting				
De	ate	Kerry Hettinger Signature of Attorn				
		Kerry Hettinger	PLC			
		4341 South Wes	tnedge Avenue			
		Suite 1202 Kalamazoo, MI 4	9008			
		269-344-0700 F	ax: 269-459-6111			
		khett57@hotmai	l.com			
		Name of law firm				